

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5

CONSERVATIVE MAJORITY FUND

ADDRESS (number and street) 2776 S ARLINGTON MILL DRIVE #806

Check if different than previously reported. (ACC) ARLINGTON VA 22206

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C C00524454

3. IS THIS REPORT NEW OR AMENDED (N) (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
July 15 Quarterly Report (Q2)
October 15 Quarterly Report (Q3)
[X] January 31 Year-End Report (YE)
July 31 Mid-Year Report (Non-election Year Only) (MY)
Termination Report (TER)

- (b) Monthly Report Due On: Feb 20 (M2), May 20 (M5), Aug 20 (M8), Nov 20 (M11) (Non-Election Year Only), Mar 20 (M3), Jun 20 (M6), Sep 20 (M9), Dec 20 (M12) (Non-Election Year Only), Apr 20 (M4), Jul 20 (M7), Oct 20 (M10), Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S)

Election on MM/DD/YYYY in the State of

- (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

Election on MM/DD/YYYY in the State of

5. Covering Period 07/01/2013 through 12/31/2013

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

Type or Print Name of Treasurer SCOTT B MACKENZIE

Signature of Treasurer SCOTT B MACKENZIE [Electronically Filed] Date 03/26/2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

CONSERVATIVE MAJORITY FUND

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="2013"/>	<input type="text" value="68916.27"/>	<input type="text" value="68916.27"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="41925.14"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="1322724.78"/>	<input type="text" value="3062191.46"/>
(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="1364649.92"/>	<input type="text" value="3131107.73"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1236798.79"/>	<input type="text" value="3003256.60"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="127851.13"/>	<input type="text" value="127851.13"/>
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="86221.50"/>	

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

CONSERVATIVE MAJORITY FUND

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).....	223833.00	336694.00
(ii) Unitemized	1098891.78	2725497.46
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	1322724.78	3062191.46
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	1322724.78	3062191.46
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	1322724.78	3062191.46
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	1322724.78	3062191.46

DETAILED SUMMARY PAGE
of Disbursements

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	1219753.79	2986211.60
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1219753.79	2986211.60
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	590.00	590.00
(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)).....	590.00	590.00
29. Other Disbursements	16455.00	16455.00
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)) ..	1236798.79	3003256.60
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1236798.79	3003256.60

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)	1322724.78	3062191.46
34. Total Contribution Refunds (from Line 28(d))	590.00	590.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1322134.78	3061601.46
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1219753.79	2986211.60
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1219753.79	2986211.60

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 724
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS CHARLOTTE A ABELL 341
 Full Name (Last, First, Middle Initial)
 Mailing Address 3789 RUM ROW
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2013
Transaction ID : SA11AI.91697
 Amount of Each Receipt this Period
 150.00

B. MS CHARLOTTE A ABELL 341
 Full Name (Last, First, Middle Initial)
 Mailing Address 3789 RUM ROW
 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 ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : SA11AI.91698
 Amount of Each Receipt this Period
 150.00

C. MS JOSEPHINE E ABERCROMBIE 403
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 68
 City VERSAILLES State KY Zip Code 40383
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation HORSE FARMER
 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 / 27 / 2013
Transaction ID : SA11AI.91704
 Amount of Each Receipt this Period
 225.00

SUBTOTAL of Receipts This Page (optional).....▶	525.00
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 7 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

A. MR KENNETH ABRAMOWITZ 068
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 958
 City SOUTHPORT State CT Zip Code 06890
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation ANALYST
 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
 12 / 24 / 2013
Transaction ID : SA11AI.91729
 Amount of Each Receipt this Period
 225.00

B. MR ROBERT B ACHESON 042
 Full Name (Last, First, Middle Initial)
 Mailing Address 12 SUGARLOAF AVE
 City DIXFIELD State ME Zip Code 04224
 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
 08 / 13 / 2013
Transaction ID : SA11AI.91738
 Amount of Each Receipt this Period
 30.00

C. MR ROBERT B ACHESON 042
 Full Name (Last, First, Middle Initial)
 Mailing Address 12 SUGARLOAF AVE
 City DIXFIELD State ME Zip Code 04224
 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 ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2013
Transaction ID : SA11AI.91742
 Amount of Each Receipt this Period
 30.00

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: (check only one)	PAGE 8 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR ROBERT B ACHESON 042
 Full Name (Last, First, Middle Initial)
 Mailing Address 12 SUGARLOAF AVE
 City DIXFIELD State ME Zip Code 04224
 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
 11 / 21 / 2013
Transaction ID : SA11AI.91741
 Amount of Each Receipt this Period
 200.00

B. MR FRANCIS ADAMS 154
 Full Name (Last, First, Middle Initial)
 Mailing Address 519 TANYARD HOLLOW RD
 City CONNELLSVILLE State PA Zip Code 15425
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UNION OPER ENGINEERS Occupation ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2013
Transaction ID : SA11AI.143221
 Amount of Each Receipt this Period
 35.00

C. MR FRANCIS ADAMS 154
 Full Name (Last, First, Middle Initial)
 Mailing Address 519 TANYARD HOLLOW RD
 City CONNELLSVILLE State PA Zip Code 15425
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UNION OPER ENGINEERS Occupation ENGINEER
 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
 11 / 06 / 2013
Transaction ID : SA11AI.91778
 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: PAGE 9 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR DUANE C ADAMS 548
 Full Name (Last, First, Middle Initial)
 Mailing Address N14313 LAKESIDE RD
 City MINONG State WI Zip Code 54859
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation TRUCKER
 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
 10 / 14 / 2013
Transaction ID : SA11AI.91822
 Amount of Each Receipt this Period
 50.00

B. MR DUANE C ADAMS 548
 Full Name (Last, First, Middle Initial)
 Mailing Address N14313 LAKESIDE RD
 City MINONG State WI Zip Code 54859
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation TRUCKER
 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
 11 / 22 / 2013
Transaction ID : SA11AI.91823
 Amount of Each Receipt this Period
 50.00

C. MR DWIGHT W ADAMS 671
 Full Name (Last, First, Middle Initial)
 Mailing Address 10135 NW 70TH AVE
 City PRATT State KS Zip Code 67124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation FARMER & HUNTING PRESERVE
 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 / 05 / 2013
Transaction ID : SA11AI.91830
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
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 10 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR DWIGHT W ADAMS 671
 Full Name (Last, First, Middle Initial)
 Mailing Address 10135 NW 70TH AVE
 City PRATT State KS Zip Code 67124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation FARMER & HUNTING PRESERVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 19 / 2013
Transaction ID : SA11AI.91831
 Amount of Each Receipt this Period 100.00

B. MR DWIGHT W ADAMS 671
 Full Name (Last, First, Middle Initial)
 Mailing Address 10135 NW 70TH AVE
 City PRATT State KS Zip Code 67124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation FARMER & HUNTING PRESERVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 07 / 2013
Transaction ID : SA11AI.91833
 Amount of Each Receipt this Period 25.00

C. MR DWIGHT W ADAMS 671
 Full Name (Last, First, Middle Initial)
 Mailing Address 10135 NW 70TH AVE
 City PRATT State KS Zip Code 67124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation FARMER & HUNTING PRESERVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 10 / 14 / 2013
Transaction ID : SA11AI.91832
 Amount of Each Receipt this Period 75.00

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 11 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR DWIGHT W ADAMS 671
 Full Name (Last, First, Middle Initial)
 Mailing Address 10135 NW 70TH AVE
 City PRATT State KS Zip Code 67124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation FARMER & HUNTING PRESERVE
 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
 11 / 21 / 2013
Transaction ID : SA11AI.91834
 Amount of Each Receipt this Period
 25.00

B. MR BERT E AERNI 800
 Full Name (Last, First, Middle Initial)
 Mailing Address 13659 W 59TH DR
 City ARVADA State CO Zip Code 80004
 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 / 18 / 2013
Transaction ID : SA11AI.91909
 Amount of Each Receipt this Period
 100.00

C. MR BERT E AERNI 800
 Full Name (Last, First, Middle Initial)
 Mailing Address 13659 W 59TH DR
 City ARVADA State CO Zip Code 80004
 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
 10 / 03 / 2013
Transaction ID : SA11AI.91914
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
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 12 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR BERT E AERNI 800
 Full Name (Last, First, Middle Initial)
 Mailing Address 13659 W 59TH DR
 City ARVADA State CO Zip Code 80004
 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
 10 / 17 / 2013
Transaction ID : SA11AI.91913
 Amount of Each Receipt this Period
 500.00

B. MR BERT E AERNI 800
 Full Name (Last, First, Middle Initial)
 Mailing Address 13659 W 59TH DR
 City ARVADA State CO Zip Code 80004
 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 ▼ 535.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 18 / 2013
Transaction ID : SA11AI.91912
 Amount of Each Receipt this Period
 35.00

C. MS GERTRUDE L AGOLIA 112
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 150596
 City BROOKLYN State NY Zip Code 11215
 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
 10 / 28 / 2013
Transaction ID : SA11AI.91924
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	185.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS FE AGUSTIN 480
 Full Name (Last, First, Middle Initial)
 Mailing Address 27074 WARNER AVE
 City WARREN State MI Zip Code 48092
 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 / 03 / 2013
Transaction ID : SA11AI.91937
 Amount of Each Receipt this Period
 150.00

B. MR JOHN AHMANN 945
 Full Name (Last, First, Middle Initial)
 Mailing Address 1400 BUCHLI STA RD
 City NAPA State CA Zip Code 94559
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation CATTLE RANCHER
 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
 10 / 21 / 2013
Transaction ID : SA11AI.91947
 Amount of Each Receipt this Period
 50.00

C. MS SUSAN E AKIN 105
 Full Name (Last, First, Middle Initial)
 Mailing Address 299 LAKE RD
 City SLEEPY HOLLOW State NY Zip Code 10591
 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2013
Transaction ID : SA11AI.91989
 Amount of Each Receipt this Period
 200.00

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 14 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR MAX AKPIK 997
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 88
 City WAINWRIGHT State AK Zip Code 99782
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2013
Transaction ID : SA11AI.91998
 Amount of Each Receipt this Period
 100.00

B. MR MAX AKPIK 997
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 88
 City WAINWRIGHT State AK Zip Code 99782
 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 ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2013
Transaction ID : SA11AI.91994
 Amount of Each Receipt this Period
 100.00

C. MR MAX U AKPIK 997
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 88
 City WAINWRIGHT State AK Zip Code 99782
 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 / 12 / 2013
Transaction ID : SA11AI.91996
 Amount of Each Receipt this Period
 450.00

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 15 OF 724
(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)
CONSERVATIVE MAJORITY FUND

A. MR MAX U AKPIK 997
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 88
 City WAINWRIGHT State AK Zip Code 99782
 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 ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2013
Transaction ID : SA11AI.91997
 Amount of Each Receipt this Period
 450.00

B. MS BARBARA L ALBERT 148
 Full Name (Last, First, Middle Initial)
 Mailing Address 9255 COUNTY ROAD 15B
 City CANASERAGA State NY Zip Code 14822
 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 / 2013
Transaction ID : SA11AI.92016
 Amount of Each Receipt this Period
 100.00

C. MS JUDY L ALESSIO 078
 Full Name (Last, First, Middle Initial)
 Mailing Address 66 GREENDELL RD
 City NEWTON State NJ Zip Code 07860
 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
 09 / 24 / 2013
Transaction ID : SA11AI.92089
 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 16 OF 724
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
CONSERVATIVE MAJORITY FUND

A. MR DOYLE ALEXANDER 727
 Full Name (Last, First, Middle Initial)
 Mailing Address 2703 CAMMI CT
 City State Zip Code
 SILOAM SPRINGS AR 72761
 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 ▼
 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 15 / 2013
Transaction ID : SA11AI.92119
 Amount of Each Receipt this Period
 100.00

B. MR LARRY E ALEXANDER 800
 Full Name (Last, First, Middle Initial)
 Mailing Address 7648 YOUNGFIELD ST
 City State Zip Code
 ARVADA CO 80005
 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 M / D D D / Y Y Y Y Y Y
 07 / 18 / 2013
Transaction ID : SA11AI.92122
 Amount of Each Receipt this Period
 125.00

C. MR JOHN W ALLEN 539
 Full Name (Last, First, Middle Initial)
 Mailing Address N2865 MOORE RD
 City State Zip Code
 COLUMBUS WI 53925
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 G&A PARTNERS PRESIDENT & COO
 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 / 2013
Transaction ID : SA11AI.92223
 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: PAGE 17 OF 724
(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)
CONSERVATIVE MAJORITY FUND

A. MR JAMES ALLEN 790
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 705
 City VEGA State TX Zip Code 79092
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ALLEN & COMPANY Occupation PHOTOGRAPHER
 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
 12 / 19 / 2013
Transaction ID : SA11AI.92250
 Amount of Each Receipt this Period
 50.00

B. MR RALPH ALLISON 351
 Full Name (Last, First, Middle Initial)
 Mailing Address 114 HOLLAND CIR
 City PELHAM State AL Zip Code 35124
 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
 10 / 28 / 2013
Transaction ID : SA11AI.92290
 Amount of Each Receipt this Period
 50.00

C. MS AGNES ALMANZA 284
 Full Name (Last, First, Middle Initial)
 Mailing Address 1685 SLOCUM TRL
 City ATKINSON State NC Zip Code 28421
 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 / 19 / 2013
Transaction ID : SA11AI.92310
 Amount of Each Receipt this Period
 75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
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 18 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS AGNES ALMANZA 284
 Full Name (Last, First, Middle Initial)
 Mailing Address 1685 SLOCUM TRL
 City State Zip Code
 ATKINSON NC 28421
 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 M / D D D / Y Y Y Y Y Y
 10 / 21 / 2013
Transaction ID : SA11AI.92311
 Amount of Each Receipt this Period
 75.00

B. MS MARIA G ALTHERR 458
 Full Name (Last, First, Middle Initial)
 Mailing Address 416 W WAYNE ST
 City State Zip Code
 CELINA OH 45822
 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 ▼
 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2013
Transaction ID : SA11AI.92347
 Amount of Each Receipt this Period
 100.00

C. MS MARIA G ALTHERR 458
 Full Name (Last, First, Middle Initial)
 Mailing Address 416 W WAYNE ST
 City State Zip Code
 CELINA OH 45822
 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 ▼
 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2013
Transaction ID : SA11AI.92345
 Amount of Each Receipt this Period
 100.00

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: PAGE 19 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS MARIA G ALTHERR 458
 Full Name (Last, First, Middle Initial)
 Mailing Address 416 W WAYNE ST
 City State Zip Code
 CELINA OH 45822
 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 ▼
 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2013
Transaction ID : SA11AI.92346
 Amount of Each Receipt this Period
 100.00

B. MR EMERSON L ANDERSON 490
 Full Name (Last, First, Middle Initial)
 Mailing Address 26867 N SHORE DR
 City State Zip Code
 STURGIS MI 49091
 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 ▼
 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 08 / 2013
Transaction ID : SA11AI.92458
 Amount of Each Receipt this Period
 35.00

C. MR EMERSON L ANDERSON 490
 Full Name (Last, First, Middle Initial)
 Mailing Address 26867 N SHORE DR
 City State Zip Code
 STURGIS MI 49091
 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 ▼
 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 14 / 2013
Transaction ID : SA11AI.92457
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 185.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 20 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR EMERSON L ANDERSON 490
 Full Name (Last, First, Middle Initial)
 Mailing Address 26867 N SHORE DR
 City STURGIS State MI Zip Code 49091
 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 / D D / Y Y Y Y Y
 09 / 13 / 2013
Transaction ID : SA11AI.92461
 Amount of Each Receipt this Period
 75.00

B. MR EMERSON L ANDERSON 490
 Full Name (Last, First, Middle Initial)
 Mailing Address 26867 N SHORE DR
 City STURGIS State MI Zip Code 49091
 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 ▼ 410.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 14 / 2013
Transaction ID : SA11AI.92460
 Amount of Each Receipt this Period
 50.00

C. MR EMERSON L ANDERSON 490
 Full Name (Last, First, Middle Initial)
 Mailing Address 26867 N SHORE DR
 City STURGIS State MI Zip Code 49091
 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 ▼ 445.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 11 / 2013
Transaction ID : SA11AI.92459
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 160.00
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 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR GLENN R ANDERSON 119
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 441
 City MATTITUCK State NY Zip Code 11952
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CHS RESTORATIONS Occupation FURNITURE RESTORATION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 12 / 2013
Transaction ID : SA11AI.92465
 Amount of Each Receipt this Period 100.00

B. MS GAIL ANDERSON 128
 Full Name (Last, First, Middle Initial)
 Mailing Address 416 UNION AVE
 City SARATOGA SPRINGS State NY Zip Code 12866
 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 / 03 / 2013
Transaction ID : SA11AI.92469
 Amount of Each Receipt this Period 100.00

C. MS GAIL ANDERSON 128
 Full Name (Last, First, Middle Initial)
 Mailing Address 416 UNION AVE
 City SARATOGA SPRINGS State NY Zip Code 12866
 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 09 / 23 / 2013
Transaction ID : SA11AI.92467
 Amount of Each Receipt this Period 500.00

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 22 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS GAIL ANDERSON 128
 Full Name (Last, First, Middle Initial)
 Mailing Address 416 UNION AVE
 City SARATOGA SPRINGS State NY Zip Code 12866
 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 ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 03 / 2013
Transaction ID : SA11AI.92468
 Amount of Each Receipt this Period
 100.00

B. MRS MILDRED M ANDERSON 468
 Full Name (Last, First, Middle Initial)
 Mailing Address 2802 OVERLOOK DR
 City FORT WAYNE State IN Zip Code 46808
 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
 09 / 24 / 2013
Transaction ID : SA11AI.92518
 Amount of Each Receipt this Period
 175.00

C. MR DALE ANDERSON 681
 Full Name (Last, First, Middle Initial)
 Mailing Address 15429 HOWE ST
 City OMAHA State NE Zip Code 68144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer OMAHA STEEL WORKS Occupation DIRECTOR OF MARKETING
 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
 08 / 12 / 2013
Transaction ID : SA11AI.92569
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	375.00
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 23 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS BETTY F ANDERSON 784			Date of Receipt
Mailing Address 337 WILLIAMSON PL			<input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11AI.92587
CRP CHRISTI	TX	78411	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="225.00"/>
Name of Employer	Occupation		
SELF EMPLOYED	FARMER		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="675.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MR KURT S ANDREWS 974			Date of Receipt
Mailing Address 76138 RIGDON DR			<input type="text" value="07"/> / <input type="text" value="04"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11AI.92669
OAKRIDGE	OR	97463	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) C. MS MARY ARCHER 800			Date of Receipt
Mailing Address 13890 E MARINA DR APT 304			<input type="text" value="10"/> / <input type="text" value="03"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11AI.92814
AURORA	CO	80014	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		
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) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="355.00"/>
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 24 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

A. MS MARY ARCHER 800
 Full Name (Last, First, Middle Initial)
 Mailing Address 13890 E MARINA DR
 APT 304
 City AURORA State CO Zip Code 80014
 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
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2013
Transaction ID : SA11AI.92813
 Amount of Each Receipt this Period
 50.00

B. MR RICHARD S ARMSTRONG 934
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 686
 City LOS OLIVOS State CA Zip Code 93441
 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
 10 / 07 / 2013
Transaction ID : SA11AI.92901
 Amount of Each Receipt this Period
 100.00

C. MS RUTH G ARNOLD 170
 Full Name (Last, First, Middle Initial)
 Mailing Address 1207 PHEASANT DR S
 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 ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 03 / 2013
Transaction ID : SA11AI.92915
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
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 724
	(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)
CONSERVATIVE MAJORITY FUND

A. MS RUTH G ARNOLD 170
 Full Name (Last, First, Middle Initial)
 Mailing Address 1207 PHEASANT DR S
 City State Zip Code
 CARLISLE PA 17013
 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
 10 / 17 / 2013
Transaction ID : SA11AI.92922
 Amount of Each Receipt this Period
 250.00

B. MS RUTH G ARNOLD 170
 Full Name (Last, First, Middle Initial)
 Mailing Address 1207 PHEASANT DR S
 City State Zip Code
 CARLISLE PA 17013
 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 ▼
 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2013
Transaction ID : SA11AI.92916
 Amount of Each Receipt this Period
 25.00

C. MS PATRICIA ARNOLD 320
 Full Name (Last, First, Middle Initial)
 Mailing Address 2660 NW NASH RD
 City State Zip Code
 LAKE CITY FL 32055
 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
 08 / 15 / 2013
Transaction ID : SA11AI.92929
 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 26 OF 724
(check only one)

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

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS PATRICIA ARNOLD 320
Full Name (Last, First, Middle Initial)
Mailing Address 2660 NW NASH RD

City LAKE CITY	State FL	Zip Code 32055
-------------------	-------------	-------------------

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
09	/	17	/	2013

Transaction ID : SA11AI.92930

Amount of Each Receipt this Period
50.00

B. MS PATRICIA ARNOLD 320
Full Name (Last, First, Middle Initial)
Mailing Address 2660 NW NASH RD

City LAKE CITY	State FL	Zip Code 32055
-------------------	-------------	-------------------

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
11	/	15	/	2013

Transaction ID : SA11AI.92928

Amount of Each Receipt this Period
35.00

C. MS AUDREY ASH 567
Full Name (Last, First, Middle Initial)
Mailing Address 304 11TH ST SE

City HALLOCK	State MN	Zip Code 56728
-----------------	-------------	-------------------

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	/	13	/	2013

Transaction ID : SA11AI.93007

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:	PAGE 27 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS AUDREY ASH 567			Date of Receipt
Mailing Address 304 11TH ST SE			<input type="text" value="09"/> / <input type="text" value="23"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11AI.93011
HALLOCK	MN	56728	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="550.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MS AUDREY ASH 567			Date of Receipt
Mailing Address 304 11TH ST SE			<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11AI.93009
HALLOCK	MN	56728	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		
NONE	RETIRED		
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) C. MS AUDREY ASH 567			Date of Receipt
Mailing Address 304 11TH ST SE			<input type="text" value="11"/> / <input type="text" value="18"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11AI.93010
HALLOCK	MN	56728	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="850.00"/>		
<input type="checkbox"/> Other (specify) ▼			

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=""/>

**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 28 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS AUDREY ASH 567			Date of Receipt
Mailing Address 304 11TH ST SE			<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11AI.93008
HALLOCK	MN	56728	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		
NONE	RETIRED		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1050.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MS STACEY W ASKEW 775			Date of Receipt
Mailing Address PO BOX 610			<input type="text" value="12"/> / <input type="text" value="06"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11AI.93063
BACLIFF	TX	77518	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		
ONEIL VA HOSPITAL	REGISTERED NURSE		
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. MR RICHARD R AYER 019			Date of Receipt
Mailing Address 82 WALNUT RD # R			<input type="text" value="09"/> / <input type="text" value="04"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11AI.93215
WENHAM	MA	01984	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="175.00"/>
Name of Employer	Occupation		
WENHAM MA	FIREMAN		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="275.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="475.00"/>
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 29 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MRS HELEN AYERS 618			Date of Receipt M M / D D / Y Y Y Y Y 10 / 10 / 2013 Transaction ID : SA11AI.93226		
Mailing Address 724 E 1000 NORTH RD			Amount of Each Receipt this Period 100.00		
City BEMENT	State IL	Zip Code 61813			
FEC ID number of contributing federal political committee. C					
Name of Employer NONE		Occupation RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00			

Full Name (Last, First, Middle Initial) B. MR KARL AYNEDTER 894			Date of Receipt M M / D D / Y Y Y Y Y 07 / 04 / 2013 Transaction ID : SA11AI.93234		
Mailing Address PO BOX 1842			Amount of Each Receipt this Period 200.00		
City ZEPHYR COVE	State NV	Zip Code 89448			
FEC ID number of contributing federal political committee. C					
Name of Employer DISABLED		Occupation RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1150.00			

Full Name (Last, First, Middle Initial) C. MR KARL AYNEDTER 894			Date of Receipt M M / D D / Y Y Y Y Y 08 / 21 / 2013 Transaction ID : SA11AI.93235		
Mailing Address PO BOX 1842			Amount of Each Receipt this Period 500.00		
City ZEPHYR COVE	State NV	Zip Code 89448			
FEC ID number of contributing federal political committee. C					
Name of Employer DISABLED		Occupation RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1650.00			

SUBTOTAL of Receipts This Page (optional).....▶	800.00
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 30 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR KARL AYNEDTER 894
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 1842
 City State Zip Code
 ZEPHYR COVE NV 89448
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 DISABLED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : SA11AI.93233
 Amount of Each Receipt this Period
 200.00

B. MR MICHAEL A BAER 605
 Full Name (Last, First, Middle Initial)
 Mailing Address 29W420 TOWNLINE RD
 City State Zip Code
 WARRENVILLE IL 60555
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 FRITZ HABER CENTER RESEARCHER
 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
 10 / 28 / 2013
Transaction ID : SA11AI.93328
 Amount of Each Receipt this Period
 75.00

C. MS JEANNE H BAETJER 211
 Full Name (Last, First, Middle Initial)
 Mailing Address 2217 GREENSPRING VALLEY RD
 City State Zip Code
 STEVENSON MD 21153
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GREATER BALTIMORE MEDICAL CTR BOARD OF TRUSTEES
 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 / 2013
Transaction ID : SA11AI.93333
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00
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 31 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR KARLUS BAILEY 233
 Full Name (Last, First, Middle Initial)
 Mailing Address 28436 HOLLY RUN DR
 City CARRSVILLE State VA Zip Code 23315
 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 / 16 / 2013
Transaction ID : SA11AI.93369
 Amount of Each Receipt this Period
 25.00

B. Kenneth Bailey 761
 Full Name (Last, First, Middle Initial)
 Mailing Address 706 E 1ST STREET
 City Fort Worth State TX Zip Code 76102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ric Occupation Radiology
 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 / 26 / 2013
Transaction ID : SA11AI.143358
 Amount of Each Receipt this Period
 250.00

C. MRS SUE BALDWIN 721
 Full Name (Last, First, Middle Initial)
 Mailing Address 58 CORONADO CIR
 City NORTH LITTLE ROCK State AR Zip Code 72116
 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 / 25 / 2013
Transaction ID : SA11AI.143368
 Amount of Each Receipt this Period
 25.00

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 32 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MRS SUE BALDWIN 721
 Full Name (Last, First, Middle Initial)
 Mailing Address 58 CORONADO CIR
 City NORTH LITTLE ROCK State AR Zip Code 72116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : SA11AI.93594
 Amount of Each Receipt this Period
 50.00

B. MRS SUE BALDWIN 721
 Full Name (Last, First, Middle Initial)
 Mailing Address 58 CORONADO CIR
 City NORTH LITTLE ROCK State AR Zip Code 72116
 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
 12 / 12 / 2013
Transaction ID : SA11AI.93593
 Amount of Each Receipt this Period
 25.00

C. MS LYNNE BALL 844
 Full Name (Last, First, Middle Initial)
 Mailing Address 1534 W PLEASANT VIEW DR
 City OGDEN State UT Zip Code 84414
 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 / 10 / 2013
Transaction ID : SA11AI.93631
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
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 33 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MRS MYRTISE 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 NONE Occupation RETIRED
 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 / 25 / 2013
Transaction ID : SA11AI.143375
 Amount of Each Receipt this Period
 20.00

B. MR JOSE BALLINA 773
 Full Name (Last, First, Middle Initial)
 Mailing Address 203 N VERSHIRE CIR
 City MAGNOLIA State TX Zip Code 77354
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DISTRADDE LLC Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2013
Transaction ID : SA11AI.93658
 Amount of Each Receipt this Period
 40.00

C. MS MARY N BALZHISER 974
 Full Name (Last, First, Middle Initial)
 Mailing Address 494 W 10TH AVE APT 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
 12 / 17 / 2013
Transaction ID : SA11AI.93667
 Amount of Each Receipt this Period
 25.00

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: (check only one)	PAGE 34 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS BETH BANKS 420
 Full Name (Last, First, Middle Initial)
 Mailing Address 6441 BARBERRY DR
 City PADUCAH State KY Zip Code 42001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2013
Transaction ID : SA11AI.93699
 Amount of Each Receipt this Period
 100.00

B. MS MARY C BARBEE 860
 Full Name (Last, First, Middle Initial)
 Mailing Address 118 S PINE ST
 City WILLIAMS State AZ Zip Code 86046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer US DEPT INTERIOR Occupation CIVIL SERVANT
 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 / 2013
Transaction ID : SA11AI.93723
 Amount of Each Receipt this Period
 25.00

C. MS MARY C BARBEE 860
 Full Name (Last, First, Middle Initial)
 Mailing Address 118 S PINE ST
 City WILLIAMS State AZ Zip Code 86046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer US DEPT INTERIOR Occupation CIVIL SERVANT
 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
 11 / 25 / 2013
Transaction ID : SA11AI.93724
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	225.00
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 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS SUZANNE BARKER 750
 Full Name (Last, First, Middle Initial)
 Mailing Address 210 LAUREL CREEK DR
 City SHERMAN State TX Zip Code 75092
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 18 / 2013
Transaction ID : SA11AI.93830
 Amount of Each Receipt this Period
 175.00

B. DR ALLAN H BARKER 841
 Full Name (Last, First, Middle Initial)
 Mailing Address 2690 E ROXBURY CIR
 City SALT LAKE CITY State UT Zip Code 84108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 03 / 2013
Transaction ID : SA11AI.93839
 Amount of Each Receipt this Period
 300.00

C. MR RONALD BARKS 995
 Full Name (Last, First, Middle Initial)
 Mailing Address 4545 OMALLY RD
 City ANCHORAGE State AK Zip Code 99507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 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 / 06 / 2013
Transaction ID : SA11AI.93848
 Amount of Each Receipt this Period
 175.00

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 36 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS MARY S BARNETT 488
 Full Name (Last, First, Middle Initial)
 Mailing Address 919 EMERALD CIR
 City LAKE ODESSA State MI Zip Code 48849
 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
 11 / 20 / 2013
Transaction ID : SA11AI.93919
 Amount of Each Receipt this Period
 50.00

B. MR FRANK W BARNETT 973
 Full Name (Last, First, Middle Initial)
 Mailing Address 10000 AIRLIE RD
 City MONMOUTH State OR Zip Code 97361
 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 / 15 / 2013
Transaction ID : SA11AI.93932
 Amount of Each Receipt this Period
 100.00

C. MS GLORIA J BARNWELL 955
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 68
 City BRIDGEVILLE State CA Zip Code 95526
 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
 12 / 20 / 2013
Transaction ID : SA11AI.93958
 Amount of Each Receipt this Period
 175.00

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 37 OF 724
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	<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)
CONSERVATIVE MAJORITY FUND

A. MS ALBERTA A BARQUIST 956
 Full Name (Last, First, Middle Initial)
 Mailing Address 11781 ARNO RD
 City WILTON State CA Zip Code 95693
 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
 10 / 17 / 2013
Transaction ID : SA11AI.93972
 Amount of Each Receipt this Period
150.00

B. MR CHARLES BARTELS 338
 Full Name (Last, First, Middle Initial)
 Mailing Address 2450 COLONEL FORD DR
 City LAKELAND State FL Zip Code 33813
 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 / 17 / 2013
Transaction ID : SA11AI.94059
 Amount of Each Receipt this Period
100.00

C. MR JOHN G BARTLETT 032
 Full Name (Last, First, Middle Initial)
 Mailing Address 666 MIDDLE RTE
 City GILMANTON State NH Zip Code 03237
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 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 / 2013
Transaction ID : SA11AI.94072
 Amount of Each Receipt this Period
300.00

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 38 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS JOYCE F BARTSCH 864
 Full Name (Last, First, Middle Initial)
 Mailing Address 1670 SOUTH DR
 City MOHAVE VALLEY State AZ Zip Code 86440
 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
 10 / 02 / 2013
Transaction ID : SA11AI.94112
 Amount of Each Receipt this Period
 100.00

B. MR HARVEY BASCOM 036
 Full Name (Last, First, Middle Initial)
 Mailing Address 54 BASCOM HILL RD
 City ALSTEAD State NH Zip Code 03602
 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 / 12 / 2013
Transaction ID : SA11AI.94121
 Amount of Each Receipt this Period
 50.00

C. MR DONALD BASS 302
 Full Name (Last, First, Middle Initial)
 Mailing Address 240 JACKSON ST
 City NEWNAN State GA Zip Code 30263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer COWITA MEDICAL CENTER Occupation MEDICAL STAFF
 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
 10 / 04 / 2013
Transaction ID : SA11AI.94147
 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 39 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR CHARLES D BASS 927
Full Name (Last, First, Middle Initial)

Mailing Address 17806 JOSHUA CIR

City FOUNTAIN VALLEY State CA Zip Code 92708

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 ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 13 / 2013
Transaction ID : SA11AI.94152

Amount of Each Receipt this Period
 300.00

B. MR CHARLES D BASS 927
Full Name (Last, First, Middle Initial)

Mailing Address 17806 JOSHUA CIR

City FOUNTAIN VALLEY State CA Zip Code 92708

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 ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 13 / 2013
Transaction ID : SA11AI.94155

Amount of Each Receipt this Period
 300.00

C. MR CHARLES D BASS 927
Full Name (Last, First, Middle Initial)

Mailing Address 17806 JOSHUA CIR

City FOUNTAIN VALLEY State CA Zip Code 92708

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 ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2013
Transaction ID : SA11AI.94154

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: PAGE 40 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR CHARLES D BASS 927
 Full Name (Last, First, Middle Initial)
 Mailing Address 17806 JOSHUA CIR
 City FOUNTAIN VALLEY State CA Zip Code 92708
 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 ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 30 / 2013
Transaction ID : SA11AI.94153
 Amount of Each Receipt this Period
 -50.00

B. MS VIRGINIA K BASS 974
 Full Name (Last, First, Middle Initial)
 Mailing Address 3432 RIVER POINTE DR
 City EUGENE State OR Zip Code 97408
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 15 / 2013
Transaction ID : SA11AI.94157
 Amount of Each Receipt this Period
 100.00

C. MS VIRGINIA K BASS 974
 Full Name (Last, First, Middle Initial)
 Mailing Address 3432 RIVER POINTE DR
 City EUGENE State OR Zip Code 97408
 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 ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2013
Transaction ID : SA11AI.94156
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 100.00
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 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR ROBERT H BATCHELLER 979
 Full Name (Last, First, Middle Initial)
 Mailing Address 796 SKYHAWK DR
 City State Zip Code
 ONTARIO OR 97914
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 25 / 2013
Transaction ID : SA11AI.94182
 Amount of Each Receipt this Period
 50.00

B. MR ROBERT H BATCHELLER 979
 Full Name (Last, First, Middle Initial)
 Mailing Address 796 SKYHAWK DR
 City State Zip Code
 ONTARIO OR 97914
 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
 12 / 16 / 2013
Transaction ID : SA11AI.94180
 Amount of Each Receipt this Period
 75.00

C. MR MARVIN H BATT 917
 Full Name (Last, First, Middle Initial)
 Mailing Address 612 E LAUREL AVE
 City State Zip Code
 GLENDORA CA 91741
 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
 12 / 17 / 2013
Transaction ID : SA11AI.94209
 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: PAGE 42 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS PEGGY H BAUMANN 532
 Full Name (Last, First, Middle Initial)
 Mailing Address 7860 N PHEASANT LN
 City MILWAUKEE State WI Zip Code 53217
 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
 12 / 05 / 2013
Transaction ID : SA11AI.94273
 Amount of Each Receipt this Period
 150.00

B. MR JERRY L BAYS 258
 Full Name (Last, First, Middle Initial)
 Mailing Address 109 CRANBERRY POINTE WAY
 City BECKLEY State WV Zip Code 25801
 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
 12 / 10 / 2013
Transaction ID : SA11AI.94316
 Amount of Each Receipt this Period
 50.00

C. MRS JOELLA BEAN 765
 Full Name (Last, First, Middle Initial)
 Mailing Address 4575 COUNTY ROAD 137
 City GATESVILLE State TX Zip Code 76528
 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 / 25 / 2013
Transaction ID : SA11AI.94344
 Amount of Each Receipt this Period
 150.00

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: PAGE 43 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR JOHN W BEASON 773
 Full Name (Last, First, Middle Initial)
 Mailing Address 1440 BRAZOS DR APT 159
 City HUNTSVILLE State TX Zip Code 77320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UNIVERSITY OF TX Occupation EDUCATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 12 / 2013
Transaction ID : SA11AI.94373
 Amount of Each Receipt this Period 100.00

B. MS CAROLYN M BEAUBOUF 710
 Full Name (Last, First, Middle Initial)
 Mailing Address 2512 HIGHWAY 5
 City GRAND CANE State LA Zip Code 71032
 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 11 / 11 / 2013
Transaction ID : SA11AI.94387
 Amount of Each Receipt this Period 100.00

C. MR PAUL D BECKER 637
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 22
 City PERRYVILLE State MO Zip Code 63775
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation NAVY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 08 / 19 / 2013
Transaction ID : SA11AI.94446
 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 44 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR PAUL D BECKER 637
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 22
 City PERRYVILLE State MO Zip Code 63775
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation NAVY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 01 / 2013
Transaction ID : SA11AI.94445
 Amount of Each Receipt this Period
 75.00

B. MS ELIZABETH J BECKMANN 330
 Full Name (Last, First, Middle Initial)
 Mailing Address 1024 ADAMS DR
 City KEY LARGO State FL Zip Code 33037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BECKMANN PROPERTIES INC Occupation PARTNER
 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
 11 / 20 / 2013
Transaction ID : SA11AI.94467
 Amount of Each Receipt this Period
 150.00

C. MS SUSAN BECRAFT 152
 Full Name (Last, First, Middle Initial)
 Mailing Address 208 HOODRIDGE DR
 City PITTSBURGH State PA Zip Code 15234
 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
 10 / 25 / 2013
Transaction ID : SA11AI.94479
 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:	PAGE 45 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

A. MS SUSAN E BEDELL 115
Full Name (Last, First, Middle Initial)
Mailing Address 7 JEAN CT
City MALVERNE State NY Zip Code 11565
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 ▼ 390.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
08 / 08 / 2013
Transaction ID : SA11AI.94480
Amount of Each Receipt this Period
150.00

B. MS MARIA BELCHER 708
Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 65376
City BATON ROUGE State LA Zip Code 70896
FEC ID number of contributing federal political committee. **C**
Name of Employer GSC Occupation SELF EMPLOYED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 850.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 25 / 2013
Transaction ID : SA11AI.143459
Amount of Each Receipt this Period
50.00

C. MS NORMA BELFRI 115
Full Name (Last, First, Middle Initial)
Mailing Address 163 LINCOLN AVE.
City ROCKVILLE CENTRE State NY Zip Code 11570
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
12 / 19 / 2013
Transaction ID : SA11AI.94596
Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
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 46 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MAYANNE G BELL 199
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 W SIDE DR
 City REHOBOTH BEACH State DE Zip Code 19971
 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 / 27 / 2013
Transaction ID : SA11AI.94622
 Amount of Each Receipt this Period
 75.00

B. MAYANNE G BELL 199
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 W SIDE DR
 City REHOBOTH BEACH State DE Zip Code 19971
 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
 11 / 27 / 2013
Transaction ID : SA11AI.94623
 Amount of Each Receipt this Period
 75.00

C. MS CONSTANCE BELL 334
 Full Name (Last, First, Middle Initial)
 Mailing Address 166 S BEACH RD
 City HOBE SOUND State FL Zip Code 33455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CONSTANCE BELL FOUNDATION INC Occupation TRUSTEE
 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 / 05 / 2013
Transaction ID : SA11AI.94632
 Amount of Each Receipt this Period
 150.00

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 47 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR ALFRED L BELLOTTO 338
 Full Name (Last, First, Middle Initial)
 Mailing Address 2200 FAIRMOUNT AVE
 City LAKELAND State FL Zip Code 33803
 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 / 27 / 2013
Transaction ID : SA11AI.94689
 Amount of Each Receipt this Period
 75.00

B. MR ALFRED L BELLOTTO 338
 Full Name (Last, First, Middle Initial)
 Mailing Address 2200 FAIRMOUNT AVE
 City LAKELAND State FL Zip Code 33803
 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
 11 / 27 / 2013
Transaction ID : SA11AI.94690
 Amount of Each Receipt this Period
 75.00

C. MS SHIRLEY A BELOCK 175
 Full Name (Last, First, Middle Initial)
 Mailing Address 514 BEECHNUT DR
 City MANHEIM State PA Zip Code 17545
 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 / 2013
Transaction ID : SA11AI.94693
 Amount of Each Receipt this Period
 150.00

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 48 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS PEGGY J BENDER 474
 Full Name (Last, First, Middle Initial)
 Mailing Address 4408 N THISTLE DR
 City BLOOMINGTON State IN Zip Code 47408
 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 / 2013
Transaction ID : SA11AI.94730
 Amount of Each Receipt this Period
 200.00

B. MS PEGGY J BENDER 474
 Full Name (Last, First, Middle Initial)
 Mailing Address 4408 N THISTLE DR
 City BLOOMINGTON State IN Zip Code 47408
 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
 11 / 11 / 2013
Transaction ID : SA11AI.94729
 Amount of Each Receipt this Period
 100.00

C. MS JOAN T BENEFIEL 210
 Full Name (Last, First, Middle Initial)
 Mailing Address 12830 TRIADELPHIA RD
 City ELLICOTT CITY State MD Zip Code 21042
 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
 10 / 21 / 2013
Transaction ID : SA11AI.94741
 Amount of Each Receipt this Period
 100.00

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: (check only one)	PAGE 49 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS ROSEMARY BENEFIELD 921
Full Name (Last, First, Middle Initial)

Mailing Address 4551 MORAGA AVE

City SAN DIEGO State CA Zip Code 92117

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

Name of Employer HOPE MEDICAL RETREAT Occupation REGISTERED NURSE

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 / 08 / 2013
Transaction ID : SA11AI.94743

Amount of Each Receipt this Period
 50.00

B. MR LLOYD P BENNETT 370
Full Name (Last, First, Middle Initial)

Mailing Address 810 STALCUP CT

City FRANKLIN State TN Zip Code 37064

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
 10 / 03 / 2013
Transaction ID : SA11AI.94788

Amount of Each Receipt this Period
 100.00

C. MS MYRNA C BENNETT 930
Full Name (Last, First, Middle Initial)

Mailing Address 444 VALLEY VISTA DR

City CAMARILLO State CA Zip Code 93010

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 / 04 / 2013
Transaction ID : SA11AI.94815

Amount of Each Receipt this Period
 100.00

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 50 OF 724
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR RONALD J BENTLEY 522			Date of Receipt
Mailing Address 108 EMMONS ST			<input type="text" value="12"/> / <input type="text" value="06"/> / <input type="text" value="2013"/>
City HIAWATHA	State IA	Zip Code 52233	Transaction ID : SA11AI.94863
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="75.00"/>
Name of Employer BENTLY INCORPORATED	Occupation SELF EMPLOYED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="225.00"/>		

Full Name (Last, First, Middle Initial) B. MR RONALD J BENTLEY 524			Date of Receipt
Mailing Address 128 2ND AVE SW			<input type="text" value="09"/> / <input type="text" value="09"/> / <input type="text" value="2013"/>
City CEDAR RAPIDS	State IA	Zip Code 52404	Transaction ID : SA11AI.94865
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="150.00"/>
Name of Employer BENTLY INCORPORATED	Occupation SELF EMPLOYED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="325.00"/>		

Full Name (Last, First, Middle Initial) C. MR RONALD J BENTLEY 524			Date of Receipt
Mailing Address 128 2ND AVE SW			<input type="text" value="11"/> / <input type="text" value="21"/> / <input type="text" value="2013"/>
City CEDAR RAPIDS	State IA	Zip Code 52404	Transaction ID : SA11AI.94866
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 BENTLY INCORPORATED	Occupation SELF EMPLOYED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="350.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="250.00"/>
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 51 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS NATALIE E BERNARD 726
 Full Name (Last, First, Middle Initial)
 Mailing Address 1008 EUGENE ST
 City HARRISON State AR Zip Code 72601
 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
 10 / 07 / 2013
Transaction ID : SA11AI.94989
 Amount of Each Receipt this Period
 25.00

B. MR HENRY BERNS 612
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 128
 City ANDOVER State IL Zip Code 61233
 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
 11 / 05 / 2013
Transaction ID : SA11AI.95006
 Amount of Each Receipt this Period
 50.00

C. MR ALLEN BERRY 370
 Full Name (Last, First, Middle Initial)
 Mailing Address 2100 S BERRYS CHAPEL RD
 City FRANKLIN State TN Zip Code 37069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer KATTEN MUCHIN ROSENMAN LLP Occupation ATTORNEY
 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 / 01 / 2013
Transaction ID : SA11AI.95024
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
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 52 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR JOHN BETTIS 855			Date of Receipt
Mailing Address 4602 S 12TH AVE			<input type="text" value="12"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11AI.95103
SAFFORD	AZ	85546	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="150.00"/>
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. MS NANCY A BEVERIDGE 617			Date of Receipt
Mailing Address 324 W POPLAR ST			<input type="text" value="09"/> / <input type="text" value="23"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11AI.95128
HEYWORTH	IL	61745	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		
SELF EMPLOYED	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) ▼			

Full Name (Last, First, Middle Initial) C. MS NANCY A BEVERIDGE 617			Date of Receipt
Mailing Address 324 W POPLAR ST			<input type="text" value="10"/> / <input type="text" value="03"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11AI.95126
HEYWORTH	IL	61745	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		
SELF EMPLOYED	FARMER		
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="220.00"/>
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 53 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS NANCY A BEVERIDGE 617
 Full Name (Last, First, Middle Initial)
 Mailing Address 324 W POPLAR ST
 City HEYWORTH State IL Zip Code 61745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 09 / 2013
Transaction ID : SA11AI.95127
 Amount of Each Receipt this Period
 50.00

B. MR EDWIN W BIEDERMAN 168
 Full Name (Last, First, Middle Initial)
 Mailing Address 1651 DOGWOOD CIR
 City STATE COLLEGE State PA Zip Code 16803
 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
 11 / 18 / 2013
Transaction ID : SA11AI.95170
 Amount of Each Receipt this Period
 25.00

C. MR BRUCE BIGRIG 430
 Full Name (Last, First, Middle Initial)
 Mailing Address 460 FEDERAL CIR
 City DELAWARE State OH Zip Code 43015
 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
 09 / 13 / 2013
Transaction ID : SA11AI.95216
 Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional).....▶	225.00
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 54 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS JANICE E BIRKELAND 087		Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 10 / 2013 Transaction ID : SA11AI.95285
Mailing Address 509 RURAL ROUTE 530 APARTMENT 166		Amount of Each Receipt this Period 125.00
City WHITING State NJ Zip Code 08759		
FEC ID number of contributing federal political committee. C		
Name of Employer NONE Occupation RETIRED	Aggregate Year-to-Date ▼	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	325.00	

Full Name (Last, First, Middle Initial) B. MS JANICE E BIRKELAND 087		Date of Receipt M M M / D D D / Y Y Y Y Y Y 08 / 30 / 2013 Transaction ID : SA11AI.95282
Mailing Address 509 RURAL ROUTE 530 APARTMENT 166		Amount of Each Receipt this Period 250.00
City WHITING State NJ Zip Code 08759		
FEC ID number of contributing federal political committee. C		
Name of Employer NONE Occupation RETIRED	Aggregate Year-to-Date ▼	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	575.00	

Full Name (Last, First, Middle Initial) C. MS JANICE E BIRKELAND 087		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 08 / 2013 Transaction ID : SA11AI.95283
Mailing Address 509 RURAL ROUTE 530 APARTMENT 166		Amount of Each Receipt this Period 100.00
City WHITING State NJ Zip Code 08759		
FEC ID number of contributing federal political committee. C		
Name of Employer NONE Occupation RETIRED	Aggregate Year-to-Date ▼	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	675.00	

SUBTOTAL of Receipts This Page (optional).....▶	475.00
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 55 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS JANICE E BIRKELAND 087
 Full Name (Last, First, Middle Initial)
 Mailing Address 509 RURAL ROUTE 530
 APARTMENT 166
 City WHITING State NJ Zip Code 08759
 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 ▼ 775.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2013
Transaction ID : SA11AI.95284
 Amount of Each Receipt this Period
 100.00

B. MR RALPH BISEK 327
 Full Name (Last, First, Middle Initial)
 Mailing Address 601 LAKE ORIENTA DR
 City ALTAMONTE SPRINGS State FL Zip Code 32701
 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 / 2013
Transaction ID : SA11AI.95316
 Amount of Each Receipt this Period
 25.00

C. MR RALPH BISEK 327
 Full Name (Last, First, Middle Initial)
 Mailing Address 601 LAKE ORIENTA DR
 City ALTAMONTE SPRINGS State FL Zip Code 32701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 03 / 2013
Transaction ID : SA11AI.95318
 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: PAGE 56 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR RALPH BISEK 327
 Full Name (Last, First, Middle Initial)
 Mailing Address 601 LAKE ORIENTA DR
 City ALTAMONTE SPRINGS State FL Zip Code 32701
 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
 10 / 29 / 2013
Transaction ID : SA11AI.95317
 Amount of Each Receipt this Period
 25.00

B. MS DORIS BISSELL 234
 Full Name (Last, First, Middle Initial)
 Mailing Address 553 HANNIBAL ST
 City VIRGINIA BEACH State VA Zip Code 23452
 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
 12 / 12 / 2013
Transaction ID : SA11AI.95352
 Amount of Each Receipt this Period
 75.00

C. MR GARY BJELLA 813
 Full Name (Last, First, Middle Initial)
 Mailing Address 8991 HIGHWAY 550
 City DURANGO State CO Zip Code 81303
 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 / 28 / 2013
Transaction ID : SA11AI.95387
 Amount of Each Receipt this Period
 350.00

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: PAGE 57 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MISS CATHERINE D BLACKMON 852
 Full Name (Last, First, Middle Initial)
 Mailing Address 6905 E OSBORN RD UNIT D
 City State Zip Code
 SCOTTSDALE AZ 85251
 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
 07 / 12 / 2013
Transaction ID : SA11AI.95425
 Amount of Each Receipt this Period
 100.00

B. MISS CATHERINE D BLACKMON 852
 Full Name (Last, First, Middle Initial)
 Mailing Address 6905 E OSBORN RD UNIT D
 City State Zip Code
 SCOTTSDALE AZ 85251
 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
 10 / 14 / 2013
Transaction ID : SA11AI.95426
 Amount of Each Receipt this Period
 100.00

C. MRS CHARLOTTE C BLACKSTOCK 325
 Full Name (Last, First, Middle Initial)
 Mailing Address 4408 AMBERWOOD CIR.
 City State Zip Code
 MILTON FL 32571
 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 / 20 / 2013
Transaction ID : SA11AI.95435
 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 58 OF 724
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MRS CHARLOTTE C BLACKSTOCK 325
 Full Name (Last, First, Middle Initial)
 Mailing Address 4408 AMBERWOOD CIR.
 City MILTON State FL Zip Code 32571
 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
 12 / 20 / 2013
Transaction ID : SA11AI.95434
 Amount of Each Receipt this Period
 50.00

B. MR JAMES H BLANKENSHIP 398
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 384
 City EDISON State GA Zip Code 39846
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BRAVEPOINT INC Occupation CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 470.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 30 / 2013
Transaction ID : SA11AI.95513
 Amount of Each Receipt this Period
 150.00

C. MR JAMES H BLANKENSHIP 398
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 384
 City EDISON State GA Zip Code 39846
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BRAVEPOINT INC Occupation CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 10 / 2013
Transaction ID : SA11AI.95512
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional).....▶	210.00
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 59 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. JOHN H 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 / 19 / 2013

Transaction ID : SA11AI.95528

Amount of Each Receipt this Period
 250.00

B. MR MARVIN F BLASKI 926
Full Name (Last, First, Middle Initial)

Mailing Address 7401 YORKTOWN AVE
APT 212

City HUNTINGTON BEACH State CA Zip Code 92648

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
 10 / 18 / 2013

Transaction ID : SA11AI.95536

Amount of Each Receipt this Period
 50.00

C. MR MARVIN F BLASKI 926
Full Name (Last, First, Middle Initial)

Mailing Address 7401 YORKTOWN AVE
APT 212

City HUNTINGTON BEACH State CA Zip Code 92648

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 335.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2013

Transaction ID : SA11AI.95537

Amount of Each Receipt this Period
 100.00

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 60 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS RITA BOCK 681
 Full Name (Last, First, Middle Initial)
 Mailing Address 859 S 118TH PLZ
 City OMAHA State NE Zip Code 68154
 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 ▼ 520.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2013
Transaction ID : SA11AI.95700
 Amount of Each Receipt this Period
 100.00

B. MR EDWARD BODAC 870
 Full Name (Last, First, Middle Initial)
 Mailing Address 807 DESERT MARIGOLD CT
 City BERNALILLO State NM Zip Code 87004
 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 / 21 / 2013
Transaction ID : SA11AI.95705
 Amount of Each Receipt this Period
 100.00

C. MR EDWARD BODAC 870
 Full Name (Last, First, Middle Initial)
 Mailing Address 807 DESERT MARIGOLD CT
 City BERNALILLO State NM Zip Code 87004
 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
 11 / 21 / 2013
Transaction ID : SA11AI.95707
 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 61 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR VERN BODHNE 560
 Full Name (Last, First, Middle Initial)
 Mailing Address 1763 70TH ST
 City FAIRMONT State MN Zip Code 56031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 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 / 26 / 2013
Transaction ID : SA11AI.95717
 Amount of Each Receipt this Period
 450.00

B. MR LAWRENCE W BOLDT 436
 Full Name (Last, First, Middle Initial)
 Mailing Address 2007 PINELAWN DR
 City TOLEDO State OH Zip Code 43614
 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 / 20 / 2013
Transaction ID : SA11AI.95795
 Amount of Each Receipt this Period
 175.00

C. MR DONALD E BOLDUC 974
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 1795
 City BANDON State OR Zip Code 97411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 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 / 06 / 2013
Transaction ID : SA11AI.95796
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional).....▶	655.00
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 62 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS BRENDA N BOLLWERK 801		Date of Receipt
Mailing Address 20230 CAMBRIDGE WAY		<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2013"/>
City	State	Transaction ID : SA11AI.95826
PARKER	CO	
Zip Code		Amount of Each Receipt this Period
80138		<input type="text" value="75.00"/>
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
NEIGHBORHOOD MARKET	GROCER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="225.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MS MAUREEN E BOONE 060		Date of Receipt
Mailing Address 131 VERNON AVE		<input type="text" value="07"/> / <input type="text" value="16"/> / <input type="text" value="2013"/>
City	State	Transaction ID : SA11AI.95922
VERNON ROCKVILLE	CT	
Zip Code		Amount of Each Receipt this Period
06066		<input type="text" value="75.00"/>
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
NONE	HOMEMAKER	
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. MS MAUREEN E BOONE 060		Date of Receipt
Mailing Address 131 VERNON AVE		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2013"/>
City	State	Transaction ID : SA11AI.95923
VERNON ROCKVILLE	CT	
Zip Code		Amount of Each Receipt this Period
06066		<input type="text" value="75.00"/>
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
NONE	HOMEMAKER	
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) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="225.00"/>
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 63 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MRS JUANITA A BORCHERS 666		Date of Receipt
Mailing Address 617 SW GRANDVIEW AVE		<input type="text" value="08"/> / <input type="text" value="26"/> / <input type="text" value="2013"/>
City	State	Zip Code
TOPEKA	KS	66606
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.95950
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="40.00"/>
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. MR BARRY T BORDEN 352		Date of Receipt
Mailing Address 2608 COMMERCE BLVD		<input type="text" value="07"/> / <input type="text" value="02"/> / <input type="text" value="2013"/>
City	State	Zip Code
BIRMINGHAM	AL	35210
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.95952
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="475.00"/>	

Full Name (Last, First, Middle Initial) C. MR BARRY T BORDEN 352		Date of Receipt
Mailing Address 2608 COMMERCE BLVD		<input type="text" value="09"/> / <input type="text" value="06"/> / <input type="text" value="2013"/>
City	State	Zip Code
BIRMINGHAM	AL	35210
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.95954
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="225.00"/>
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"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="365.00"/>
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 64 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR BARRY T BORDEN 352
 Full Name (Last, First, Middle Initial)
 Mailing Address 2608 COMMERCE BLVD
 City BIRMINGHAM State AL Zip Code 35210
 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 10 / 02 / 2013
Transaction ID : SA11AI.95953
 Amount of Each Receipt this Period 100.00

B. MS LORRAINE BORINTRAGER 465
 Full Name (Last, First, Middle Initial)
 Mailing Address 15850 COUNTY ROAD 34
 City GOSHEN State IN Zip Code 46528
 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 ▼ 250.00

Date of Receipt 10 / 28 / 2013
Transaction ID : SA11AI.95988
 Amount of Each Receipt this Period 50.00

C. MS LORRAINE BORINTRAGER 465
 Full Name (Last, First, Middle Initial)
 Mailing Address 15850 COUNTY ROAD 34
 City GOSHEN State IN Zip Code 46528
 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 ▼ 325.00

Date of Receipt 12 / 11 / 2013
Transaction ID : SA11AI.95987
 Amount of Each Receipt this Period 75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
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 724
	(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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS DIANE BOSLER 298			Date of Receipt
Mailing Address PO BOX 242			<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11AI.96016
ALLENDALE	SC	29810	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		<input type="text" value="250.00"/>
NONE	NOT EMPLOYED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼		

Full Name (Last, First, Middle Initial) B. MS DIANE BOSLER 298			Date of Receipt
Mailing Address PO BOX 242			<input type="text" value="12"/> / <input type="text" value="09"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11AI.96018
ALLENDALE	SC	29810	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		<input type="text" value="300.00"/>
NONE	NOT EMPLOYED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼		

Full Name (Last, First, Middle Initial) C. MR CHARLES E BOSWELL 296			Date of Receipt
Mailing Address 112 MANDALAY WAY			<input type="text" value="11"/> / <input type="text" value="20"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11AI.96050
SENECA	SC	29672	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		<input type="text" value="220.00"/>
NONE	RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="150.00"/>
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 66 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS ELIZABETH M BOURKE 232
 Full Name (Last, First, Middle Initial)
 Mailing Address 5419 CARY STREET RD
 City RICHMOND State VA Zip Code 23226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 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
 12 / 10 / 2013
Transaction ID : SA11AI.96091
 Amount of Each Receipt this Period
 250.00

B. MRS ANNE R BOURNE 383
 Full Name (Last, First, Middle Initial)
 Mailing Address 2960 SALES LANDING RD
 City CAMDEN State TN Zip Code 38320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation TEACHER
 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 / 2013
Transaction ID : SA11AI.96098
 Amount of Each Receipt this Period
 100.00

C. MR GRADY BOWEN 271
 Full Name (Last, First, Middle Initial)
 Mailing Address 5554 OVERLOOK CIR
 City WINSTON SALEM State NC Zip Code 27105
 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 / 09 / 2013
Transaction ID : SA11AI.96138
 Amount of Each Receipt this Period
 75.00

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 67 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. ANNAS A BOWLING 377
 Full Name (Last, First, Middle Initial)
 Mailing Address 7304 WASHINGTON PIKE
 City CORRYTON State TN Zip Code 37721
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 08 / 2013
Transaction ID : SA11AI.96206
 Amount of Each Receipt this Period
 200.00

B. MS SALLY J BOWMAN 274
 Full Name (Last, First, Middle Initial)
 Mailing Address 4434 OLD BATTLEGROUND RD
 UNIT 229
 City GREENSBORO State NC Zip Code 27410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 23 / 2013
Transaction ID : SA11AI.96218
 Amount of Each Receipt this Period
 100.00

C. MR FLOYD BOWSER 541
 Full Name (Last, First, Middle Initial)
 Mailing Address 4840 US HIGHWAY 2
 City FLORENCE State WI Zip Code 54121
 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 ▼ 215.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 06 / 2013
Transaction ID : SA11AI.96238
 Amount of Each Receipt this Period
 35.00

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: PAGE 68 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR VINAL BOWYER 469
 Full Name (Last, First, Middle Initial)
 Mailing Address 2539 S WILLOW CREEK DR
 City PERU State IN Zip Code 46970
 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 ▼ 470.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2013
Transaction ID : SA11AI.96241
 Amount of Each Receipt this Period
 100.00

B. MR VINAL BOWYER 469
 Full Name (Last, First, Middle Initial)
 Mailing Address 2539 S WILLOW CREEK DR
 City PERU State IN Zip Code 46970
 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
 M M M / D D D / Y Y Y Y Y Y
 09 / 18 / 2013
Transaction ID : SA11AI.96242
 Amount of Each Receipt this Period
 10.00

C. MR VINAL BOWYER 469
 Full Name (Last, First, Middle Initial)
 Mailing Address 2539 S WILLOW CREEK DR
 City PERU State IN Zip Code 46970
 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 ▼ 980.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2013
Transaction ID : SA11AI.143605
 Amount of Each Receipt this Period
 500.00

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 69 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

A. MR VINAL BOWYER 469
Full Name (Last, First, Middle Initial)

Mailing Address 2539 S WILLOW CREEK DR

City PERU State IN Zip Code 46970

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
 11 / 20 / 2013

Transaction ID : SA11AI.96240

Amount of Each Receipt this Period
100.00

B. MRS FUMIE BOYCE 985
Full Name (Last, First, Middle Initial)

Mailing Address 432 INCELCO LOOP SE
APT 157

City OLYMPIA State WA Zip Code 98503

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 ▼
1700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 30 / 2013

Transaction ID : SA11AI.96256

Amount of Each Receipt this Period
500.00

C. MRS FUMIE BOYCE 985
Full Name (Last, First, Middle Initial)

Mailing Address 432 INCELCO LOOP SE
APT 157

City OLYMPIA State WA Zip Code 98503

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 22 / 2013

Transaction ID : SA11AI.96257

Amount of Each Receipt this Period
100.00

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 70 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MRS FUMIE BOYCE 985		Date of Receipt
Mailing Address 432 INCELCO LOOP SE APT 157		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City OLYMPIA State WA Zip Code 98503		<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.96260
Name of Employer NONE Occupation RETIRED		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="500.00"/>
Aggregate Year-to-Date ▼		
<input type="text" value="2300.00"/>		

Full Name (Last, First, Middle Initial) B. MRS FUMIE BOYCE 985		Date of Receipt
Mailing Address 432 INCELCO LOOP SE APT 157		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City OLYMPIA State WA Zip Code 98503		<input type="text" value="11"/> / <input type="text" value="22"/> / <input type="text" value="2013"/>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.96261
Name of Employer NONE Occupation RETIRED		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="100.00"/>
Aggregate Year-to-Date ▼		
<input type="text" value="2400.00"/>		

Full Name (Last, First, Middle Initial) C. MRS FUMIE BOYCE 985		Date of Receipt
Mailing Address 432 INCELCO LOOP SE APT 157		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City OLYMPIA State WA Zip Code 98503		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2013"/>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.96258
Name of Employer NONE Occupation RETIRED		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="-100.00"/>
Aggregate Year-to-Date ▼		
<input type="text" value="2300.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="500.00"/>
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 71 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MRS FUMIE BOYCE 985
 Full Name (Last, First, Middle Initial)
 Mailing Address 432 INCELCO LOOP SE
 APT 157
 City OLYMPIA State WA Zip Code 98503
 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 ▼ 2200.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 27 / 2013
Transaction ID : SA11AI.96259
 Amount of Each Receipt this Period
 -100.00

B. MR EDWARD R BOYD 338
 Full Name (Last, First, Middle Initial)
 Mailing Address 135 HARBOR WAY
 City AUBURNDALE State FL Zip Code 33823
 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
 11 / 04 / 2013
Transaction ID : SA11AI.96277
 Amount of Each Receipt this Period
 100.00

C. MR EDWARD R BOYD 338
 Full Name (Last, First, Middle Initial)
 Mailing Address 135 HARBOR WAY
 City AUBURNDALE State FL Zip Code 33823
 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
 11 / 12 / 2013
Transaction ID : SA11AI.96278
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	25.00
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 72 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR DARRELL H BOYD 554
 Full Name (Last, First, Middle Initial)
 Mailing Address 6816 CHEYENNE CIR
 City EDINA State MN Zip Code 55439
 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 / 03 / 2013
Transaction ID : SA11AI.96294
 Amount of Each Receipt this Period
 200.00

B. MR OTTIE G BRADFORD 934
 Full Name (Last, First, Middle Initial)
 Mailing Address 834 NICKLAUS ST
 City PASO ROBLES State CA Zip Code 93446
 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
 11 / 25 / 2013
Transaction ID : SA11AI.96409
 Amount of Each Receipt this Period
 75.00

C. MR OLIN H BRADLEY 764
 Full Name (Last, First, Middle Initial)
 Mailing Address 10400 LIPAN HWY
 City LIPAN State TX Zip Code 76462
 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 / 26 / 2013
Transaction ID : SA11AI.96426
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00
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 73 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR JOHN BRADLEY 809			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 14 / 2013 Transaction ID : SA11AI.96429		
Mailing Address 4050 OLD RANCH RD			Amount of Each Receipt this Period 200.00		
City COLORADO SPRINGS	State CO	Zip Code 80908			
FEC ID number of contributing federal political committee. C					
Name of Employer NONE		Occupation RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00			

Full Name (Last, First, Middle Initial) B. MR GEORGE R BRANDON 986			Date of Receipt M M M / D D D / Y Y Y Y Y Y 08 / 05 / 2013 Transaction ID : SA11AI.96502		
Mailing Address PO BOX 393			Amount of Each Receipt this Period 250.00		
City TROUT LAKE	State WA	Zip Code 98650			
FEC ID number of contributing federal political committee. C					
Name of Employer NONE		Occupation RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00			

Full Name (Last, First, Middle Initial) C. MR GEORGE R BRANDON 986			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 05 / 2013 Transaction ID : SA11AI.96503		
Mailing Address PO BOX 393			Amount of Each Receipt this Period 250.00		
City TROUT LAKE	State WA	Zip Code 98650			
FEC ID number of contributing federal political committee. C					
Name of Employer NONE		Occupation RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 900.00			

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 74 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR GEORGE R BRANDON 986
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 393

City TROUT LAKE State WA Zip Code 98650

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
 12 / 26 / 2013

Transaction ID : SA11AI.96501

Amount of Each Receipt this Period
-250.00

B. MS SHARON BRANSON 760
Full Name (Last, First, Middle Initial)

Mailing Address 1220 AIRPORT FWY STE F

City BEDFORD State TX Zip Code 76022

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

Name of Employer BRANSON DENTAL Occupation OFFICE STAFF

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
 10 / 29 / 2013

Transaction ID : SA11AI.96526

Amount of Each Receipt this Period
150.00

C. MR JAMES BRAWLEY 874
Full Name (Last, First, Middle Initial)

Mailing Address 2201 ZUNI DR

City FARMINGTON State NM Zip Code 87401

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

Name of Employer MORRISON MAHONEY LLP Occupation ATTORNEY

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
 11 / 22 / 2013

Transaction ID : SA11AI.96580

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶	0.00
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 75 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR DONALD BRECHEEN 708			Date of Receipt
Mailing Address 19210 N SHORE CT			<input type="text" value="09"/> / <input type="text" value="04"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11AI.96610
BATON ROUGE	LA	70817	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		
NONE	RETIRED		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="450.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MR FRANCIS J BRENNAN 134			Date of Receipt
Mailing Address 333 STAFFORD AVE			<input type="text" value="08"/> / <input type="text" value="22"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11AI.96662
WATERVILLE	NY	13480	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="210.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. MR FRANCIS J BRENNAN 134			Date of Receipt
Mailing Address 333 STAFFORD AVE			<input type="text" value="09"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11AI.96661
WATERVILLE	NY	13480	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="245.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="270.00"/>
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 76 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR FRANCIS J BRENNAN 134
 Full Name (Last, First, Middle Initial)
 Mailing Address 333 STAFFORD AVE
 City WATERVILLE State NY Zip Code 13480
 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
 11 / 22 / 2013
Transaction ID : SA11AI.96658
 Amount of Each Receipt this Period
 35.00

B. MR FRANCIS J BRENNAN 134
 Full Name (Last, First, Middle Initial)
 Mailing Address 333 STAFFORD AVE
 City WATERVILLE State NY Zip Code 13480
 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
 11 / 25 / 2013
Transaction ID : SA11AI.96657
 Amount of Each Receipt this Period
 45.00

C. MR VINCENT J BRENNAN 320
 Full Name (Last, First, Middle Initial)
 Mailing Address 745 CHERRY GROVE RD
 City ORANGE PARK State FL Zip Code 32073
 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
 11 / 18 / 2013
Transaction ID : SA11AI.96667
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional).....▶	280.00
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 77 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR JAMES J BRENNAN 604
 Full Name (Last, First, Middle Initial)
 Mailing Address 7717 CENTRAL AVE
 City BURBANK State IL Zip Code 60459
 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
 07 / 01 / 2013
Transaction ID : SA11AI.96670
 Amount of Each Receipt this Period
 125.00

B. MR JAMES J BRENNAN 604
 Full Name (Last, First, Middle Initial)
 Mailing Address 7717 CENTRAL AVE
 City BURBANK State IL Zip Code 60459
 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
 10 / 03 / 2013
Transaction ID : SA11AI.96671
 Amount of Each Receipt this Period
 125.00

C. MS MAXINE P BRIAN 190
 Full Name (Last, First, Middle Initial)
 Mailing Address 92 STEEPLECHASE DR
 City MEDIA State PA Zip Code 19063
 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 / 09 / 2013
Transaction ID : SA11AI.96715
 Amount of Each Receipt this Period
 100.00

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:	PAGE 78 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR CHARLES BRICKER 431			Date of Receipt
Mailing Address 9240 KIOUSVILLE GEORGESVILL RD			<input type="text" value="10"/> / <input type="text" value="07"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11AI.96725
LONDON	OH	43140	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 NONE		Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="275.00"/>	

Full Name (Last, First, Middle Initial) B. MS LENORA D BRIGGS 458			Date of Receipt
Mailing Address 8436 STATE ROUTE 235			<input type="text" value="09"/> / <input type="text" value="12"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11AI.96764
ALGER	OH	45812	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 NONE		Occupation HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="240.00"/>	

Full Name (Last, First, Middle Initial) C. MS LAVELLE BRITT 635			Date of Receipt
Mailing Address 23199 GAZETTE PL			<input type="text" value="08"/> / <input type="text" value="26"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11AI.96848
CALLAO	MO	63534	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 SELF EMPLOYED		Occupation FARMER	
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="375.00"/>
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 79 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR CLIFFORD BRIZENDINE 948		Date of Receipt
Mailing Address 4007 WESLEY WAY		<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2013"/>
City	State	Zip Code
EL SOBRANTE	CA	94803
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="checkbox"/> Other (specify) ▼	<input type="text" value="225.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="75.00"/>

Full Name (Last, First, Middle Initial) B. MR DONALD BRODERSEN 809		Date of Receipt
Mailing Address 4362 ALDER SPRINGS VW		<input type="text" value="09"/> / <input type="text" value="09"/> / <input type="text" value="2013"/>
City	State	Zip Code
COLORADO SPGS	CO	80922
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="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>

Full Name (Last, First, Middle Initial) C. MR JOHN BRODMAN 433		Date of Receipt
Mailing Address 10455 COUNTY HIGHWAY 16		<input type="text" value="09"/> / <input type="text" value="03"/> / <input type="text" value="2013"/>
City	State	Zip Code
CAREY	OH	43316
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
JOHN'S PERFORMANCE SHOP	BUSINESS OWNER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="225.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="75.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="250.00"/>
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 80 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MRS HELEN BROGLEY 610
 Full Name (Last, First, Middle Initial)
 Mailing Address 9197 IL ROUTE 84 N
 City State Zip Code
 GALENA IL 61036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AUTO AUCTION SALES
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 23 / 2013
Transaction ID : SA11AI.96924
 Amount of Each Receipt this Period
 50.00

B. MS DIANE BROOKS 334
 Full Name (Last, First, Middle Initial)
 Mailing Address 2866 OLD CYPRESS N
 City State Zip Code
 PALM BEACH GARDENS FL 33410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE HOMEMAKER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 08 / 2013
Transaction ID : SA11AI.96940
 Amount of Each Receipt this Period
 250.00

C. MS DIANE BROOKS 334
 Full Name (Last, First, Middle Initial)
 Mailing Address 2866 OLD CYPRESS N
 City State Zip Code
 PALM BEACH GARDENS FL 33410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE HOMEMAKER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 550.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 30 / 2013
Transaction ID : SA11AI.96941
 Amount of Each Receipt this Period
 150.00

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 81 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS VICTORIA M BROWN 206			Date of Receipt
Mailing Address 38232 PALMER RD			<input type="text" value="12"/> / <input type="text" value="11"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11AI.97031
COLTONS POINT	MD	20626	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		
LOGISTICS SUPPORT INC	EXECUTIVE		
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) B. MS KAREN S BROWN 597			Date of Receipt
Mailing Address PO BOX 181			<input type="text" value="10"/> / <input type="text" value="14"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11AI.97122
BELGRADE	MT	59714	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="150.00"/>
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 KAREN S BROWN 597			Date of Receipt
Mailing Address PO BOX 181			<input type="text" value="12"/> / <input type="text" value="16"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11AI.97121
BELGRADE	MT	59714	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="150.00"/>
Name of Employer	Occupation		
NONE	RETIRED		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="450.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="550.00"/>
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 82 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR LEONARD D BROWN 780
 Full Name (Last, First, Middle Initial)
 Mailing Address 1321 MEADOWLARK
 City PLEASANTON State TX Zip Code 78064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer KD&K INC Occupation SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 22 / 2013
Transaction ID : SA11AI.97173
 Amount of Each Receipt this Period
 100.00

B. MR LEONARD D BROWN 780
 Full Name (Last, First, Middle Initial)
 Mailing Address 1321 MEADOWLARK
 City PLEASANTON State TX Zip Code 78064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer KD&K INC Occupation SELF EMPLOYED
 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
 08 / 21 / 2013
Transaction ID : SA11AI.97174
 Amount of Each Receipt this Period
 100.00

C. MR LEONARD D BROWN 780
 Full Name (Last, First, Middle Initial)
 Mailing Address 1321 MEADOWLARK
 City PLEASANTON State TX Zip Code 78064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer KD&K INC Occupation SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 07 / 2013
Transaction ID : SA11AI.97175
 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 83 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR LEONARD D BROWN 780		Date of Receipt
Mailing Address 1321 MEADOWLARK		<input type="text" value="11"/> / <input type="text" value="21"/> / <input type="text" value="2013"/>
City	State	Zip Code
PLEASANTON	TX	78064
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.97172
Name of Employer	Occupation	Amount of Each Receipt this Period
KD&K INC	SELF EMPLOYED	<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="1000.00"/>	

Full Name (Last, First, Middle Initial) B. MR JOHN W BROWN 893		Date of Receipt
Mailing Address PO BOX 471		<input type="text" value="07"/> / <input type="text" value="08"/> / <input type="text" value="2013"/>
City	State	Zip Code
EUREKA	NV	89316
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.97208
Name of Employer	Occupation	Amount of Each Receipt this Period
BROWN BROTHERS	PARTNER	<input type="text" value="1500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1500.00"/>	

Full Name (Last, First, Middle Initial) C. DR DONALD L BROWNING 954 MD		Date of Receipt
Mailing Address 325 N TUNIS ST		<input type="text" value="08"/> / <input type="text" value="06"/> / <input type="text" value="2013"/>
City	State	Zip Code
LAKEPORT	CA	95453
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.97254
Name of Employer	Occupation	Amount of Each Receipt this Period
SELF EMPLOYED	PHYSICIAN	<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="1700.00"/>
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 84 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. DR DONALD L BROWNING 954 MD			Date of Receipt M M / D D / Y Y Y Y Y 11 / 06 / 2013 Transaction ID : SA11AI.97255
Mailing Address 325 N TUNIS ST			Amount of Each Receipt this Period 100.00
City LAKEPORT	State CA	Zip Code 95453	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 400.00
Name of Employer SELF EMPLOYED		Occupation PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MR CHARLES H BRUNIE 068			Date of Receipt M M / D D / Y Y Y Y Y 10 / 24 / 2013 Transaction ID : SA11AI.97327
Mailing Address 5 PARTRIDGE HOLLOW RD			Amount of Each Receipt this Period 150.00
City GREENWICH	State CT	Zip Code 06831	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 250.00
Name of Employer NONE		Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. MR CHARLES H BRUNIE 068			Date of Receipt M M / D D / Y Y Y Y Y 12 / 02 / 2013 Transaction ID : SA11AI.97328
Mailing Address 5 PARTRIDGE HOLLOW RD			Amount of Each Receipt this Period 225.00
City GREENWICH	State CT	Zip Code 06831	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 475.00
Name of Employer NONE		Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	475.00
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 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR LORING H BRUNIUS 956
 Full Name (Last, First, Middle Initial)
 Mailing Address 1845 QUARRY RD
 City PLACERVILLE State CA Zip Code 95667
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 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 / 2013
Transaction ID : SA11AI.97330
 Amount of Each Receipt this Period
 100.00

B. MR LORING H BRUNIUS 956
 Full Name (Last, First, Middle Initial)
 Mailing Address 1845 QUARRY RD
 City PLACERVILLE State CA Zip Code 95667
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2013
Transaction ID : SA11AI.97331
 Amount of Each Receipt this Period
 225.00

C. MS DARLENE BRUNS 936
 Full Name (Last, First, Middle Initial)
 Mailing Address 31005 RUTH HILL RD
 City SQUAW VALLEY State CA Zip Code 93675
 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
 10 / 22 / 2013
Transaction ID : SA11AI.97346
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 525.00
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 86 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MAGALEN O BRYANT 201
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 247
 City MIDDLEBURG State VA Zip Code 20118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LOCUST HILL FARM Occupation OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **675.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2013
Transaction ID : SA11AI.97386
 Amount of Each Receipt this Period
300.00

B. MS JOYCE BUCHANAN 450
 Full Name (Last, First, Middle Initial)
 Mailing Address 2920 WATER ST
 City HAMILTON State OH Zip Code 45013
 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 **225.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2013
Transaction ID : SA11AI.97432
 Amount of Each Receipt this Period
25.00

C. EMMA JEAN BUCHKOVICH 159
 Full Name (Last, First, Middle Initial)
 Mailing Address 1700 VEIL AVE APT 610
 City WINDBER State PA Zip Code 15963
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **215.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2013
Transaction ID : SA11AI.97454
 Amount of Each Receipt this Period
40.00

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 87 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR LARRY BUNKER 644
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 100

City GENTRY State MO Zip Code 64453

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

Name of Employer NONE Occupation SELF EMPLOYED

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 / 01 / 2013
Transaction ID : SA11AI.97630

Amount of Each Receipt this Period
 300.00

B. MR DONALD BURDETT 148
Full Name (Last, First, Middle Initial)

Mailing Address 7130 BURDETT RD

City HORNELL State NY Zip Code 14843

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 / 16 / 2013
Transaction ID : SA11AI.97670

Amount of Each Receipt this Period
 35.00

C. MR WALTER C BURMEISTER 606
Full Name (Last, First, Middle Initial)

Mailing Address 5314 S SPRINGFIELD AVE

City CHICAGO State IL Zip Code 60632

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 / 12 / 2013
Transaction ID : SA11AI.97771

Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	435.00
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 88 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

A. MR BOBBY G BURNS 236
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 FINDLEY ST
 City HAMPTON State VA Zip Code 23666
 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
 10 / 16 / 2013
Transaction ID : SA11AI.97795
 Amount of Each Receipt this Period
 50.00

B. MS ADA J BURROUGHS 324
 Full Name (Last, First, Middle Initial)
 Mailing Address 1610 FOUNTAIN CT
 City CHIPLEY State FL Zip Code 32428
 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
 10 / 07 / 2013
Transaction ID : SA11AI.97855
 Amount of Each Receipt this Period
 75.00

C. MS DOROTHY Q BURSEY 273
 Full Name (Last, First, Middle Initial)
 Mailing Address 3067 BOURBON ST
 City SANFORD State NC Zip Code 27332
 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
 08 / 07 / 2013
Transaction ID : SA11AI.97860
 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:	PAGE 89 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

A. MS DOROTHY Q BURSEY 273
 Full Name (Last, First, Middle Initial)
 Mailing Address 3067 BOURBON ST
 City SANFORD State NC Zip Code 27332
 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 / 30 / 2013
Transaction ID : SA11AI.97861
 Amount of Each Receipt this Period
 25.00

B. MS DOROTHY Q BURSEY 273
 Full Name (Last, First, Middle Initial)
 Mailing Address 3067 BOURBON ST
 City SANFORD State NC Zip Code 27332
 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
 10 / 25 / 2013
Transaction ID : SA11AI.97862
 Amount of Each Receipt this Period
 25.00

C. MS DOROTHY Q BURSEY 273
 Full Name (Last, First, Middle Initial)
 Mailing Address 3067 BOURBON ST
 City SANFORD State NC Zip Code 27332
 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
 12 / 30 / 2013
Transaction ID : SA11AI.97863
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	75.00
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 90 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR JAMES R BUSALACCHI 883
 Full Name (Last, First, Middle Initial)
 Mailing Address 21 CALLE TORTUGA
 City LA LUZ State NM Zip Code 88337
 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 / 17 / 2013
Transaction ID : SA11AI.97895
 Amount of Each Receipt this Period
 100.00

B. MR JAMES R BUSALACCHI 883
 Full Name (Last, First, Middle Initial)
 Mailing Address 21 CALLE TORTUGA
 City LA LUZ State NM Zip Code 88337
 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
 09 / 05 / 2013
Transaction ID : SA11AI.97896
 Amount of Each Receipt this Period
 50.00

C. MR HARRY L BUSBY 928 CPA
 Full Name (Last, First, Middle Initial)
 Mailing Address 308 BLUEBELL AVE
 City PLACENTIA State CA Zip Code 92870
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation CPA
 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 / 2013
Transaction ID : SA11AI.97904
 Amount of Each Receipt this Period
 100.00

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 91 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR HARRY L BUSBY 928 CPA
 Full Name (Last, First, Middle Initial)
 Mailing Address 308 BLUEBELL AVE
 City PLACENTIA State CA Zip Code 92870
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 08 / 2013
Transaction ID : SA11AI.97903
 Amount of Each Receipt this Period
 50.00

B. MR HARRY L BUSBY 928 CPA
 Full Name (Last, First, Middle Initial)
 Mailing Address 308 BLUEBELL AVE
 City PLACENTIA State CA Zip Code 92870
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 22 / 2013
Transaction ID : SA11AI.97902
 Amount of Each Receipt this Period
 -50.00

C. MR THOMAS R BUSSELL 370
 Full Name (Last, First, Middle Initial)
 Mailing Address 9238 BRUSHBORO DR
 City BRENTWOOD State TN Zip Code 37027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 26 / 2013
Transaction ID : SA11AI.97942
 Amount of Each Receipt this Period
 60.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00
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 92 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR THOMAS R BUSSELL 370
 Full Name (Last, First, Middle Initial)
 Mailing Address 9238 BRUSHBORO DR
 City BRENTWOOD State TN Zip Code 37027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 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
 10 / 01 / 2013
Transaction ID : SA11AI.97941
 Amount of Each Receipt this Period
 30.00

B. MR RICHARD L BUTSCH 402
 Full Name (Last, First, Middle Initial)
 Mailing Address 3303 STARTAN CT
 City LOUISVILLE State KY Zip Code 40220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation INVENTOR
 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
 11 / 27 / 2013
Transaction ID : SA11AI.98002
 Amount of Each Receipt this Period
 25.00

C. MS JO ANN BUTTACAVOLI 070
 Full Name (Last, First, Middle Initial)
 Mailing Address 55 W 1ST ST
 APT C1
 City BAYONNE State NJ Zip Code 07002
 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 / 30 / 2013
Transaction ID : SA11AI.98004
 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 93 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS JO ANN BUTTACAVOLI 070		Date of Receipt
Mailing Address 55 W 1ST ST APT C1		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Zip Code
BAYONNE	NJ	07002
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.98005
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<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="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) B. MR SCOTT H BUZBY 329		Date of Receipt
Mailing Address 1275 W SOUTHWINDS BLVD		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2013"/>
City	State	Zip Code
VERO BEACH	FL	32963
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.98028
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<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="checkbox"/> Other (specify) ▼	<input type="text" value="625.00"/>	

Full Name (Last, First, Middle Initial) C. MS DELLA J CABLE 989		Date of Receipt
Mailing Address 211 N 40TH AVE APT 401		<input type="text" value="09"/> / <input type="text" value="06"/> / <input type="text" value="2013"/>
City	State	Zip Code
YAKIMA	WA	98908
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.98092
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
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="230.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="225.00"/>
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 94 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS BARBARA K CAIN 330
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 510102

City KEY COL BEACH	State FL	Zip Code 33051
-----------------------	-------------	-------------------

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 / 09 / 2013
Transaction ID : SA11AI.98122

Amount of Each Receipt this Period
 100.00

B. MS BARBARA K CAIN 330
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 510102

City KEY COL BEACH	State FL	Zip Code 33051
-----------------------	-------------	-------------------

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
 12 / 09 / 2013
Transaction ID : SA11AI.98121

Amount of Each Receipt this Period
 100.00

C. MS MARGARET CALDWELL 880
 Full Name (Last, First, Middle Initial)
 Mailing Address 2975 TERRACE DR APT 217

City LAS CRUCES	State NM	Zip Code 88011
--------------------	-------------	-------------------

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

Name of Employer MARGARET CALDWELL LC	Occupation SELF EMPLOYED
------------------------------------------	-----------------------------

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 / 2013
Transaction ID : SA11AI.98162

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 95 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS CORINNE R CALLAS 829
 Full Name (Last, First, Middle Initial)
 Mailing Address 318 JADE ST
 City State Zip Code
 ROCK SPRINGS WY 82901
 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 / 22 / 2013
Transaction ID : SA11AI.98201
 Amount of Each Receipt this Period
 150.00

B. MS JOANNE CAMP 493
 Full Name (Last, First, Middle Initial)
 Mailing Address 431 MAIN ST
 City State Zip Code
 BLANCHARD MI 49310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 LOAFERS GLORY SALES
 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
 09 / 03 / 2013
Transaction ID : SA11AI.98257
 Amount of Each Receipt this Period
 100.00

C. MS JOANNE CAMP 493
 Full Name (Last, First, Middle Initial)
 Mailing Address 431 MAIN ST
 City State Zip Code
 BLANCHARD MI 49310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 LOAFERS GLORY SALES
 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
 11 / 27 / 2013
Transaction ID : SA11AI.98256
 Amount of Each Receipt this Period
 20.00

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 96 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR TOBY CAMP 840
 Full Name (Last, First, Middle Initial)
 Mailing Address 8372 INDIAN OAK DR
 City WEST JORDAN State UT Zip Code 84081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TOBES SPORTZ Occupation REGISTERED AGENT
 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
 07 / 29 / 2013
Transaction ID : SA11AI.98261
 Amount of Each Receipt this Period
 50.00

B. MR TOBY CAMP 840
 Full Name (Last, First, Middle Initial)
 Mailing Address 8372 INDIAN OAK DR
 City WEST JORDAN State UT Zip Code 84081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TOBES SPORTZ Occupation REGISTERED AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2013
Transaction ID : SA11AI.98260
 Amount of Each Receipt this Period
 50.00

C. MR TOBY CAMP 840
 Full Name (Last, First, Middle Initial)
 Mailing Address 8372 INDIAN OAK DR
 City WEST JORDAN State UT Zip Code 84081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TOBES SPORTZ Occupation REGISTERED AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 21 / 2013
Transaction ID : SA11AI.98259
 Amount of Each Receipt this Period
 150.00

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 97 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

A. MR WENDELL A CAMPANELLA 883
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 274
 City TINNIE State NM Zip Code 88351
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 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
 12 / 19 / 2013
Transaction ID : SA11AI.98264
 Amount of Each Receipt this Period
 175.00

B. MR ROBERT F CAMPBELL 763
 Full Name (Last, First, Middle Initial)
 Mailing Address 905 BAYLOR ST
 City WICHITA FALLS State TX Zip Code 76301
 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 ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 01 / 2013
Transaction ID : SA11AI.98328
 Amount of Each Receipt this Period
 75.00

C. MRS PEGGY A CAMPION 349
 Full Name (Last, First, Middle Initial)
 Mailing Address 545 SW SAINT LUCIE CRES
 City STUART State FL Zip Code 34994
 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 ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2013
Transaction ID : SA11AI.98366
 Amount of Each Receipt this Period
 100.00

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: PAGE 98 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS JOYCE P CARACCI 392
 Full Name (Last, First, Middle Initial)
 Mailing Address 5018 RIVERWOOD CIR
 City JACKSON State MS Zip Code 39211
 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 / 18 / 2013
Transaction ID : SA11AI.98441
 Amount of Each Receipt this Period
 225.00

B. MR JOHN CARBONARO 070
 Full Name (Last, First, Middle Initial)
 Mailing Address 727 RAHWAY AVE
 City WOODBRIDGE State NJ Zip Code 07095
 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
 07 / 11 / 2013
Transaction ID : SA11AI.98448
 Amount of Each Receipt this Period
 50.00

C. MS CHERYL A CARLETON 038
 Full Name (Last, First, Middle Initial)
 Mailing Address 80 UNION WHARF RD
 City MIRROR LAKE State NH Zip Code 03853
 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
 07 / 11 / 2013
Transaction ID : SA11AI.98495
 Amount of Each Receipt this Period
 125.00

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 99 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS CHERYL A CARLETON 038
 Full Name (Last, First, Middle Initial)
 Mailing Address 80 UNION WHARF RD
 City MIRROR LAKE State NH Zip Code 03853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2013
Transaction ID : SA11AI.98496
 Amount of Each Receipt this Period
 125.00

B. MR EDWARD CARLEVALE 171
 Full Name (Last, First, Middle Initial)
 Mailing Address 225 N 48TH ST
 City HARRISBURG State PA Zip Code 17111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 26 / 2013
Transaction ID : SA11AI.98499
 Amount of Each Receipt this Period
 100.00

C. MR WILLIAM L CARLSEN 104
 Full Name (Last, First, Middle Initial)
 Mailing Address 1925 PILGRIM AVE
 City BRONX State NY Zip Code 10461
 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 ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 06 / 2013
Transaction ID : SA11AI.98519
 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 100 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR RON CARLSON 995
Full Name (Last, First, Middle Initial)

Mailing Address 181 SHELLY MARIE CIR

City ANCHORAGE State AK Zip Code 99515

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

Name of Employer SELF EMPLOYED Occupation WRITER

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
 12 / 26 / 2013
Transaction ID : SA11AI.98569

Amount of Each Receipt this Period
 100.00

B. MS JOY CARNEY 655
Full Name (Last, First, Middle Initial)

Mailing Address 999 BROKEN POST

City RICHLAND State MO Zip Code 65556

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

Name of Employer NONE Occupation SELF EMPLOYED

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 / 2013
Transaction ID : SA11AI.98610

Amount of Each Receipt this Period
 50.00

C. MS JOY CARNEY 655
Full Name (Last, First, Middle Initial)

Mailing Address 999 BROKEN POST

City RICHLAND State MO Zip Code 65556

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

Name of Employer NONE Occupation SELF EMPLOYED

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
 11 / 11 / 2013
Transaction ID : SA11AI.98609

Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00

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 724
	(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)
CONSERVATIVE MAJORITY FUND

A. MR ROBERT E CARR 882
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 789
 City EUNICE State NM Zip Code 88231
 FEC ID number of contributing federal political committee. **C**
 Name of Employer WALLACH CONCERT Occupation TRUCKER
 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
10 / 16 / 2013
Transaction ID : SA11AI.98675
 Amount of Each Receipt this Period
100.00

B. MS GWEN J CARR 920
 Full Name (Last, First, Middle Initial)
 Mailing Address 2275 VIA. CASCABEL
 City ESCONDIDO State CA Zip Code 92027
 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 / 11 / 2013
Transaction ID : SA11AI.98676
 Amount of Each Receipt this Period
100.00

C. MS MARIANNA H CARROLL 300
 Full Name (Last, First, Middle Initial)
 Mailing Address 1550 PARK CHASE
 City CUMMING State GA Zip Code 30041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CARROLL & COMPANY Occupation CPA
 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 / 2013
Transaction ID : SA11AI.98689
 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 102 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS MARIANNA H CARROLL 300
Full Name (Last, First, Middle Initial)

Mailing Address 1550 PARK CHASE

City CUMMING State GA Zip Code 30041

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

Name of Employer CARROLL & COMPANY Occupation CPA

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
 11 / 27 / 2013

Transaction ID : SA11AI.98688

Amount of Each Receipt this Period
 100.00

B. MR PHILIP L CARROLL 503
Full Name (Last, First, Middle Initial)

Mailing Address 3012 E MADISON AVE

City DES MOINES State IA Zip Code 50317

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 / 06 / 2013

Transaction ID : SA11AI.98692

Amount of Each Receipt this Period
 100.00

C. MR CLEMENT CARROLL 713
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 14267

City ALEXANDRIA State LA Zip Code 71315

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
 12 / 13 / 2013

Transaction ID : SA11AI.98695

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 103 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR SAMUAL CARROLL 822
 Full Name (Last, First, Middle Initial)
 Mailing Address 119 ROCKY RD
 City TORRINGTON State WY Zip Code 82240
 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
 12 / 05 / 2013
Transaction ID : SA11AI.98703
 Amount of Each Receipt this Period
 50.00

B. MS LUCILLE H CARTA 285
 Full Name (Last, First, Middle Initial)
 Mailing Address 160 CURT HOLLAND RD
 City STELLA State NC Zip Code 28582
 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
 11 / 18 / 2013
Transaction ID : SA11AI.98729
 Amount of Each Receipt this Period
 100.00

C. MR PETER F CARTER 347
 Full Name (Last, First, Middle Initial)
 Mailing Address 11447 S EM EN EL GROVE RD
 City LEESBURG State FL Zip Code 34788
 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 / 16 / 2013
Transaction ID : SA11AI.98754
 Amount of Each Receipt this Period
 100.00

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 104 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS LYNN CARTHY 150
 Full Name (Last, First, Middle Initial)
 Mailing Address 3611 CENTERVIEW RD
 City State Zip Code
 GIBSONIA PA 15044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF EMPLOYED Home Maker
 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
 12 / 04 / 2013
Transaction ID : SA11AI.98791
 Amount of Each Receipt this Period
 125.00

B. MS TIFFANY B CASARES 900
 Full Name (Last, First, Middle Initial)
 Mailing Address 12483 BRADDOCK DR
 City State Zip Code
 LOS ANGELES CA 90066
 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 ▼
 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : SA11AI.98814
 Amount of Each Receipt this Period
 70.00

C. DOSIA S CASEY 764
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 2379
 City State Zip Code
 ALBANY TX 76430
 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 ▼
 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2013
Transaction ID : SA11AI.98850
 Amount of Each Receipt this Period
 75.00

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: (check only one)	PAGE 105 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS BETTY Y CASSELMAN 705		Date of Receipt
Mailing Address 10686 HIGHWAY 87		<input type="text" value="11"/> / <input type="text" value="11"/> / <input type="text" value="2013"/>
City	State	Zip Code
JEANERETTE	LA	70544
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.98884
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="60.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="220.00"/>	

Full Name (Last, First, Middle Initial) B. MS DEBBIE J CASTEEL 327		Date of Receipt
Mailing Address 1210 18TH ST		<input type="text" value="08"/> / <input type="text" value="14"/> / <input type="text" value="2013"/>
City	State	Zip Code
ORANGE CITY	FL	32763
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.98903
Name of Employer	Occupation	Amount of Each Receipt this Period
		<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="225.00"/>	

Full Name (Last, First, Middle Initial) C. MS DEBBIE J CASTEEL 327		Date of Receipt
Mailing Address 1210 18TH ST		<input type="text" value="11"/> / <input type="text" value="14"/> / <input type="text" value="2013"/>
City	State	Zip Code
ORANGE CITY	FL	32763
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.98901
Name of Employer	Occupation	Amount of Each Receipt this Period
		<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="250.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="110.00"/>
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 106 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS ELIZABETH A CATER 433
 Full Name (Last, First, Middle Initial)
 Mailing Address 507 W FINDLAY ST
 City CAREY State OH Zip Code 43316
 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
 11 / 15 / 2013
Transaction ID : SA11AI.98957
 Amount of Each Receipt this Period
 50.00

B. MR BRUCE CATES 475
 Full Name (Last, First, Middle Initial)
 Mailing Address 8333 N STATE ROAD 161
 City GENTRYVILLE State IN Zip Code 47537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 23 / 2013
Transaction ID : SA11AI.98960
 Amount of Each Receipt this Period
 175.00

C. MS BETTY M CAUTHEN 297
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 812
 City LANCASTER State SC Zip Code 29721
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 08 / 2013
Transaction ID : SA11AI.98996
 Amount of Each Receipt this Period
 50.00

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: PAGE 107 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MRS SARAH M CEJKA 524
 Full Name (Last, First, Middle Initial)
 Mailing Address 1751 MCROBERTS RD
 City CEDAR RAPIDS State IA Zip Code 52403
 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 / D D / Y Y Y Y Y
 08 / 26 / 2013
Transaction ID : SA11AI.99043
 Amount of Each Receipt this Period
 175.00

B. MRS SARAH M CEJKA 524
 Full Name (Last, First, Middle Initial)
 Mailing Address 1751 MCROBERTS RD
 City CEDAR RAPIDS State IA Zip Code 52403
 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 / D D / Y Y Y Y Y
 12 / 31 / 2013
Transaction ID : SA11AI.99044
 Amount of Each Receipt this Period
 -175.00

C. MR RON C CEMPER 687
 Full Name (Last, First, Middle Initial)
 Mailing Address 49491 HWY 20
 City ONEILL State NE Zip Code 68763
 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 / D D / Y Y Y Y Y
 08 / 27 / 2013
Transaction ID : SA11AI.99050
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 20.00
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 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR RON C CEMPER 687		Date of Receipt
Mailing Address 49491 HWY 20		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2013"/>
City ONEILL	State NE	Zip Code 68763
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.99053
Name of Employer NONE		Amount of Each Receipt this Period
Occupation RETIRED		<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="230.00"/>		

Full Name (Last, First, Middle Initial) B. MS BETTY H CHAMBERS 359		Date of Receipt
Mailing Address 4905 SARDIS RD		<input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2013"/>
City BOAZ	State AL	Zip Code 35956
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.99119
Name of Employer NONE		Amount of Each Receipt this Period
Occupation RETIRED		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="210.00"/>		

Full Name (Last, First, Middle Initial) C. MS BETTY H CHAMBERS 359		Date of Receipt
Mailing Address 4905 SARDIS RD		<input type="text" value="12"/> / <input type="text" value="16"/> / <input type="text" value="2013"/>
City BOAZ	State AL	Zip Code 35956
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.99118
Name of Employer NONE		Amount of Each Receipt this Period
Occupation RETIRED		<input type="text" value="40.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="250.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="110.00"/>
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 109 OF 724
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR CHARLES H CHAMBERY 144
Full Name (Last, First, Middle Initial)
Mailing Address 2265 STATE ROUTE 65

City BLOOMFIELD	State NY	Zip Code 14469
--------------------	-------------	-------------------

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
11	/	05	/	2013

Transaction ID : SA11AI.99128

Amount of Each Receipt this Period
100.00

B. MR CHARLES H CHAMBERY 144
Full Name (Last, First, Middle Initial)
Mailing Address 2265 STATE ROUTE 65

City BLOOMFIELD	State NY	Zip Code 14469
--------------------	-------------	-------------------

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
12	/	26	/	2013

Transaction ID : SA11AI.99127

Amount of Each Receipt this Period
150.00

C. MR JAMES CHANDLER 781
Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 372

City STOCKDALE	State TX	Zip Code 78160
-------------------	-------------	-------------------

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
12	/	13	/	2013

Transaction ID : SA11AI.99160

Amount of Each Receipt this Period
250.00

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 110 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR CHARLES H CHANDLER 978
 Full Name (Last, First, Middle Initial)
 Mailing Address 17528 CHANDLER LN
 City State Zip Code
 BAKER CITY OR 97814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CHANDLER HERFORDS INC RANCHER
 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
 10 / 28 / 2013
Transaction ID : SA11AI.99165
 Amount of Each Receipt this Period
 100.00

B. MS FRANCES CHAPIN 026
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 1044
 City State Zip Code
 BREWSTER MA 02631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CAPE COD COMMUNITY COLLEGE EDUCATOR
 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 / 26 / 2013
Transaction ID : SA11AI.99178
 Amount of Each Receipt this Period
 50.00

C. MR JOSEPH R CHAPMAN 162
 Full Name (Last, First, Middle Initial)
 Mailing Address 216 BUFFALO ST
 City State Zip Code
 FREEPORT PA 16229
 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
 08 / 12 / 2013
Transaction ID : SA11AI.99184
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
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 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR JOSEPH R CHAPMAN 162
 Full Name (Last, First, Middle Initial)
 Mailing Address 216 BUFFALO ST
 City FREEPORT State PA Zip Code 16229
 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
 12 / 16 / 2013
Transaction ID : SA11AI.99183
 Amount of Each Receipt this Period
 250.00

B. MR VICTOR CHAPMAN 652
 Full Name (Last, First, Middle Initial)
 Mailing Address 4201 CLARK LN LOT 69
 City COLUMBIA State MO Zip Code 65202
 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 / 24 / 2013
Transaction ID : SA11AI.99204
 Amount of Each Receipt this Period
 125.00

C. MRS ELMA M CHARLTON 443
 Full Name (Last, First, Middle Initial)
 Mailing Address 596 TAMIAMI TRL
 City AKRON State OH Zip Code 44303
 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 / 16 / 2013
Transaction ID : SA11AI.99226
 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: (check only one)	PAGE 112 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MRS ELMA M CHARLTON 443
Full Name (Last, First, Middle Initial)

Mailing Address 596 TAMIAMI TRL

City AKRON State OH Zip Code 44303

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 ▼ 320.00

Date of Receipt
10 / 03 / 2013
Transaction ID : SA11AI.99225

Amount of Each Receipt this Period
100.00

B. MRS ELMA M CHARLTON 443
Full Name (Last, First, Middle Initial)

Mailing Address 596 TAMIAMI TRL

City AKRON State OH Zip Code 44303

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
10 / 18 / 2013
Transaction ID : SA11AI.99224

Amount of Each Receipt this Period
-100.00

C. MS JEAN CHESHIRE 304
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1610

City STATESBORO State GA Zip Code 30459

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 / 30 / 2013
Transaction ID : SA11AI.99308

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶ 100.00

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 113 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MRS VIRGINIA CHITWOOD 796		Date of Receipt
Mailing Address 95 HEDGES RD		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code
ABILENE	TX	79605
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.99374
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	HOMEMAKER	<input type="text" value="150.00"/>
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. MS KAREN H CHUGG 846		Date of Receipt
Mailing Address PO BOX 650010		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code
STERLING	UT	84665
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.99472
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	NOT EMPLOYED	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="205.00"/>	

Full Name (Last, First, Middle Initial) C. MS KAREN H CHUGG 846		Date of Receipt
Mailing Address PO BOX 650010		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code
STERLING	UT	84665
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.99471
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	NOT EMPLOYED	<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="230.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="225.00"/>
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 114 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. NORLENE CKODRE 779
Full Name (Last, First, Middle Initial)

Mailing Address 105 DUNBAR DR

City VICTORIA State TX Zip Code 77904

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
 12 / 17 / 2013
Transaction ID : SA11AI.99558

Amount of Each Receipt this Period
 75.00

B. MS NAOMI R CLADY 433
Full Name (Last, First, Middle Initial)

Mailing Address 850 MARSEILLES AVE

City UPPER SANDUSKY State OH Zip Code 43351

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 ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 21 / 2013
Transaction ID : SA11AI.99561

Amount of Each Receipt this Period
 50.00

C. MRS MARY J CLARK 481
Full Name (Last, First, Middle Initial)

Mailing Address 9400 HURON RIVER DR

City DEXTER State MI Zip Code 48130

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

Name of Employer SELF EMPLOYED Occupation PROFESSIONAL COUNSELOR

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
 11 / 15 / 2013
Transaction ID : SA11AI.99650

Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00

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 115 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR EDWARD P CLARKE 068		Date of Receipt
Mailing Address 50 LEDGE RD APARTMENT 127		<input type="text" value="10"/> / <input type="text" value="03"/> / <input type="text" value="2013"/>
City DARIEN	State CT	Zip Code 06820
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.99717
Name of Employer NONE	Occupation RETIRED	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="100.00"/>
	<input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) B. MR EDWARD P CLARKE 068		Date of Receipt
Mailing Address 50 LEDGE RD APARTMENT 127		<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2013"/>
City DARIEN	State CT	Zip Code 06820
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.99716
Name of Employer NONE	Occupation RETIRED	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="100.00"/>
	<input type="text" value="400.00"/>	

Full Name (Last, First, Middle Initial) C. MS SHEILA M CLEMENTS 905		Date of Receipt
Mailing Address 23530 HAAS AVE		<input type="text" value="12"/> / <input type="text" value="02"/> / <input type="text" value="2013"/>
City TORRANCE	State CA	Zip Code 90501
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.99808
Name of Employer NONE	Occupation RETIRED	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="25.00"/>
	<input type="text" value="225.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="225.00"/>
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 116 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS JOANNE CLEVINGER 672
 Full Name (Last, First, Middle Initial)
 Mailing Address 228 N ROBIN RD
 City WICHITA State KS Zip Code 67212
 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
 07 / 09 / 2013
Transaction ID : SA11AI.99837
 Amount of Each Receipt this Period
 75.00

B. MS MELINDA D CLIFTON 364
 Full Name (Last, First, Middle Initial)
 Mailing Address 21106 CANTALINE BRIDGE RD
 City ANDALUSIA State AL Zip Code 36420
 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
 12 / 10 / 2013
Transaction ID : SA11AI.99856
 Amount of Each Receipt this Period
 150.00

C. MR CLYDE R CLOAR 294
 Full Name (Last, First, Middle Initial)
 Mailing Address 1976 HEIDELBERG DR
 City MT PLEASANT State SC Zip Code 29464
 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 / 02 / 2013
Transaction ID : SA11AI.99896
 Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00
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 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS ELEANOR 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 ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2013
Transaction ID : SA11AI.99963
 Amount of Each Receipt this Period
 250.00

B. MS JO ANN COGGESHALL 467
 Full Name (Last, First, Middle Initial)
 Mailing Address 701 W HARCOURT RD APT 133B
 City ANGOLA State IN Zip Code 46703
 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 ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2013
Transaction ID : SA11AI.100045
 Amount of Each Receipt this Period
 50.00

C. MS INGRID COHEN 070
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 HORIZON RD APT 2709
 City FORT LEE State NJ Zip Code 07024
 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 / 07 / 2013
Transaction ID : SA11AI.100051
 Amount of Each Receipt this Period
 100.00

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: (check only one)	PAGE 118 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS INGRID COHEN 070		Date of Receipt
Mailing Address 6 HORIZON RD APT 2709		<input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2013"/>
City	State	Zip Code
FORT LEE	NJ	07024
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.100052
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="600.00"/>	

Full Name (Last, First, Middle Initial) B. MR RICHARD COLE 145		Date of Receipt
Mailing Address 90 S MAIN ST		<input type="text" value="09"/> / <input type="text" value="23"/> / <input type="text" value="2013"/>
City	State	Zip Code
PITTSFORD	NY	14534
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.100115
Name of Employer	Occupation	Amount of Each Receipt this Period
SELF EMPLOYED	ATTORNEY	<input type="text" value="50.00"/>
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) C. MR RICHARD COLE 145		Date of Receipt
Mailing Address 90 S MAIN ST		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Zip Code
PITTSFORD	NY	14534
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.143917
Name of Employer	Occupation	Amount of Each Receipt this Period
SELF EMPLOYED	ATTORNEY	<input type="text" value="50.00"/>
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="200.00"/>
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 119 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR RICHARD COLE 145
 Full Name (Last, First, Middle Initial)
 Mailing Address 90 S MAIN ST
 City State Zip Code
 PITTSFORD NY 14534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF EMPLOYED ATTORNEY
 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
 12 / 23 / 2013
Transaction ID : SA11AI.100116
 Amount of Each Receipt this Period
 50.00

B. MS LORETTA J COLLINS 599
 Full Name (Last, First, Middle Initial)
 Mailing Address 103 RITZMAN LN
 City State Zip Code
 KALISPELL MT 59901
 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 / 05 / 2013
Transaction ID : SA11AI.100258
 Amount of Each Receipt this Period
 100.00

C. MRS CINDY J COLLINS 769
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 1273
 City State Zip Code
 SONORA TX 76950
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 U OF MICHIGAN RESEARCH PROCESS COORDINATOR
 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 / 27 / 2013
Transaction ID : SA11AI.100271
 Amount of Each Receipt this Period
 100.00

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 120 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MRS CINDY J COLLINS 769
Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 1273

City SONORA	State TX	Zip Code 76950
FEC ID number of contributing federal political committee. C		
Name of Employer U OF MICHIGAN	Occupation RESEARCH PROCESS COORDINATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 27 / 2013
Transaction ID : SA11AI.100272

Amount of Each Receipt this Period
100.00

B. MS ROBERTA D COLSON 322
Full Name (Last, First, Middle Initial)
Mailing Address 413 MORNING GLORY LN N

City JACKSONVILLE	State FL	Zip Code 32259
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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 / 2013
Transaction ID : SA11AI.100305

Amount of Each Receipt this Period
50.00

C. MS ROBERTA D COLSON 322
Full Name (Last, First, Middle Initial)
Mailing Address 413 MORNING GLORY LN N

City JACKSONVILLE	State FL	Zip Code 32259
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 30 / 2013
Transaction ID : SA11AI.100304

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 121 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MRS FLEURETTE E COLUCCI 100
 Full Name (Last, First, Middle Initial)
 Mailing Address 240 E 47TH ST APT 38C
 City NEW YORK State NY Zip Code 10017
 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
 10 / 29 / 2013
Transaction ID : SA11AI.100310
 Amount of Each Receipt this Period
 100.00

B. MRS FLEURETTE E COLUCCI 100
 Full Name (Last, First, Middle Initial)
 Mailing Address 240 E 47TH ST APT 38C
 City NEW YORK State NY Zip Code 10017
 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
 12 / 26 / 2013
Transaction ID : SA11AI.100309
 Amount of Each Receipt this Period
 150.00

C. MS JEAN E COMEFORO 190
 Full Name (Last, First, Middle Initial)
 Mailing Address 315 CATCH PENNY LN
 City MEDIA State PA Zip Code 19063
 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 / 27 / 2013
Transaction ID : SA11AI.100333
 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 122 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS JEAN E COMEFORO 190
 Full Name (Last, First, Middle Initial)
 Mailing Address 315 CATCH PENNY LN
 City MEDIA State PA Zip Code 19063
 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
 11 / 26 / 2013
Transaction ID : SA11AI.100334
 Amount of Each Receipt this Period
 250.00

B. MS JEAN E COMEFORO 190
 Full Name (Last, First, Middle Initial)
 Mailing Address 315 CATCH PENNY LN
 City MEDIA State PA Zip Code 19063
 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 / D D / Y Y Y Y Y
 12 / 23 / 2013
Transaction ID : SA11AI.100332
 Amount of Each Receipt this Period
 125.00

C. MS SANDRA CONDITT 751
 Full Name (Last, First, Middle Initial)
 Mailing Address 5999 FM 987
 City TERRELL State TX Zip Code 75160
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 27 / 2013
Transaction ID : SA11AI.100378
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 165.00
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 724
	(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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. DR GERAD CONIGLIO 145 MD			Date of Receipt
Mailing Address 37 MURRAY ST			<input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11AI.100389
MOUNT MORRIS	NY	14510	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		
SELF EMPLOYED	PHYSICIAN		
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. MS JENNIFER J CONNELL 310			Date of Receipt
Mailing Address 6084 JR SIMS RD			<input type="text" value="08"/> / <input type="text" value="26"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11AI.100429
IRWINTON	GA	31042	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="250.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. MS JENNIFER J CONNELL 310			Date of Receipt
Mailing Address 6084 JR SIMS RD			<input type="text" value="10"/> / <input type="text" value="08"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11AI.100430
IRWINTON	GA	31042	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="300.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="250.00"/>
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 124 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR WILLIAM CONNOLE 067
 Full Name (Last, First, Middle Initial)
 Mailing Address 393 TORRINGFORD EAST ST
 City TORRINGTON State CT Zip Code 06790
 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
 10 / 21 / 2013
Transaction ID : SA11AI.100452
 Amount of Each Receipt this Period
 200.00

B. MR WILLIAM CONNOLE 067
 Full Name (Last, First, Middle Initial)
 Mailing Address 393 TORRINGFORD EAST ST
 City TORRINGTON State CT Zip Code 06790
 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
 12 / 06 / 2013
Transaction ID : SA11AI.100457
 Amount of Each Receipt this Period
 30.00

C. MS MARY LOU CONOVER 605
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 191
 City OSWEGO State IL Zip Code 60543
 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
 12 / 06 / 2013
Transaction ID : SA11AI.143936
 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 125 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR JOE A CONWAY 714
 Full Name (Last, First, Middle Initial)
 Mailing Address 1518 WATERBIND RD
 City GRAYSON State LA Zip Code 71435
 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
 10 / 02 / 2013
Transaction ID : SA11AI.100508
 Amount of Each Receipt this Period
 50.00

B. MS MURIEL D COOK 601
 Full Name (Last, First, Middle Initial)
 Mailing Address 4207 ROYAL SAINT ANNE CT
 City ST CHARLES State IL Zip Code 60174
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 17 / 2013
Transaction ID : SA11AI.100553
 Amount of Each Receipt this Period
 175.00

C. MR GEORGE C COOK 631
 Full Name (Last, First, Middle Initial)
 Mailing Address 12339 CONWAY RD
 City SAINT LOUIS State MO Zip Code 63141
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 12 / 2013
Transaction ID : SA11AI.100556
 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 126 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS GAIL SHEPARD COOK 639		Date of Receipt
Mailing Address HC 2 BOX 2032		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code
WAPPAPELLO	MO	63966
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.100560
Name of Employer NONE		Amount of Each Receipt this Period
Occupation RETIRED		<input type="text" value=""/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="25.00"/>
Aggregate Year-to-Date ▼		
<input type="text" value="205.00"/>		

Full Name (Last, First, Middle Initial) B. MR CHARLES R COOK 648		Date of Receipt
Mailing Address 1011 JEFFERSON AVE		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code
JOPLIN	MO	64801
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.100561
Name of Employer NONE		Amount of Each Receipt this Period
Occupation RETIRED		<input type="text" value="75.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼		
<input type="text" value="425.00"/>		

Full Name (Last, First, Middle Initial) C. MR CHARLES R COOK 648		Date of Receipt
Mailing Address 1011 JEFFERSON AVE		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code
JOPLIN	MO	64801
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.100562
Name of Employer NONE		Amount of Each Receipt this Period
Occupation RETIRED		<input type="text" value="75.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼		
<input type="text" value="500.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="175.00"/>
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 127 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS LORAIN COOK 983
 Full Name (Last, First, Middle Initial)
 Mailing Address 6738 CHICO WAY NW
 City BREMERTON State WA Zip Code 98312
 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 / 23 / 2013
Transaction ID : SA11AI.100601
 Amount of Each Receipt this Period
 50.00

B. MS LORAIN COOK 983
 Full Name (Last, First, Middle Initial)
 Mailing Address 6738 CHICO WAY NW
 City BREMERTON State WA Zip Code 98312
 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
 10 / 25 / 2013
Transaction ID : SA11AI.143942
 Amount of Each Receipt this Period
 75.00

C. MRS BONNIE WHITE COON 365
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 291
 City ATMORE State AL Zip Code 36504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DIAMOND GASOLINE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 22 / 2013
Transaction ID : SA11AI.100622
 Amount of Each Receipt this Period
 1250.00

SUBTOTAL of Receipts This Page (optional).....▶	1375.00
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 128 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MRS BONNIE WHITE COON 365			Date of Receipt M M / D D / Y Y Y Y 07 / 22 / 2013 Transaction ID : SA11Al.100623
Mailing Address PO BOX 291			Amount of Each Receipt this Period 500.00
City ATMORE	State AL	Zip Code 36504	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 3075.00
Name of Employer DIAMOND GASOLINE		Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MRS BONNIE WHITE COON 365			Date of Receipt M M / D D / Y Y Y Y 08 / 26 / 2013 Transaction ID : SA11Al.100625
Mailing Address PO BOX 291			Amount of Each Receipt this Period 250.00
City ATMORE	State AL	Zip Code 36504	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 3325.00
Name of Employer DIAMOND GASOLINE		Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. MRS BONNIE WHITE COON 365			Date of Receipt M M / D D / Y Y Y Y 10 / 22 / 2013 Transaction ID : SA11Al.100624
Mailing Address PO BOX 291			Amount of Each Receipt this Period 500.00
City ATMORE	State AL	Zip Code 36504	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 3825.00
Name of Employer DIAMOND GASOLINE		Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	1250.00
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 129 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS JOANNE V COOPER 432
 Full Name (Last, First, Middle Initial)
 Mailing Address 1360 LA ROCHELLE DR
 City COLUMBUS State OH Zip Code 43221
 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 ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 07 / 2013
Transaction ID : SA11Al.100650
 Amount of Each Receipt this Period
 100.00

B. MRS JOAN L CORDES 336
 Full Name (Last, First, Middle Initial)
 Mailing Address 15816 SANCTUARY DR
 City TAMPA State FL Zip Code 33647
 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 / 27 / 2013
Transaction ID : SA11Al.100720
 Amount of Each Receipt this Period
 100.00

C. J 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 RANCHER
 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
 11 / 04 / 2013
Transaction ID : SA11Al.100793
 Amount of Each Receipt this Period
 225.00

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 130 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS 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 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 / 03 / 2013
Transaction ID : SA11Al.100789
 Amount of Each Receipt this Period
 150.00

B. MS 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 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 / 16 / 2013
Transaction ID : SA11Al.100790
 Amount of Each Receipt this Period
 200.00

C. MS 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 NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2013
Transaction ID : SA11Al.100791
 Amount of Each Receipt this Period
 300.00

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 131 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR PAUL CORRIGAN 480		Date of Receipt
Mailing Address 26980 CRESTWOOD DR		<input type="text" value="07"/> / <input type="text" value="23"/> / <input type="text" value="2013"/>
City State Zip Code FRANKLIN MI 48025		Transaction ID : SA11Al.100794
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="150.00"/>
Name of Employer CORRIGAN MOVING SYSTEMS	Occupation OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) B. MR PAUL CORRIGAN 480		Date of Receipt
Mailing Address 26980 CRESTWOOD DR		<input type="text" value="09"/> / <input type="text" value="09"/> / <input type="text" value="2013"/>
City State Zip Code FRANKLIN MI 48025		Transaction ID : SA11Al.100795
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="200.00"/>
Name of Employer CORRIGAN MOVING SYSTEMS	Occupation OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="450.00"/>	

Full Name (Last, First, Middle Initial) C. MR PAUL CORRIGAN 480		Date of Receipt
Mailing Address 26980 CRESTWOOD DR		<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2013"/>
City State Zip Code FRANKLIN MI 48025		Transaction ID : SA11Al.100796
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="150.00"/>
Name of Employer CORRIGAN MOVING SYSTEMS	Occupation OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="600.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="500.00"/>
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 132 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR 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 CORRIGAN MOVING SYSTEMS Occupation OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2013
Transaction ID : SA11AI.100797
 Amount of Each Receipt this Period
 250.00

B. MR PAUL COSTA 894
 Full Name (Last, First, Middle Initial)
 Mailing Address 99 UPPER COLONY RD
 City WELLINGTON State NV Zip Code 89444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer USMC 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
 08 / 26 / 2013
Transaction ID : SA11AI.100840
 Amount of Each Receipt this Period
 300.00

C. MR PAUL COSTA 894
 Full Name (Last, First, Middle Initial)
 Mailing Address 99 UPPER COLONY RD
 City WELLINGTON State NV Zip Code 89444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer USMC 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
 10 / 21 / 2013
Transaction ID : SA11AI.100839
 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 133 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS LORAIN M COSTLEY 137
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 BURN
 City APALACHIN State NY Zip Code 13732
 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
 10 / 14 / 2013
Transaction ID : SA11Al.100853
 Amount of Each Receipt this Period
 100.00

B. MS DORIS J COTTINGHAM 479
 Full Name (Last, First, Middle Initial)
 Mailing Address 5192 N 900 E
 City OTTERBEIN State IN Zip Code 47970
 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 / 17 / 2013
Transaction ID : SA11Al.100871
 Amount of Each Receipt this Period
 100.00

C. MS DORIS J COTTINGHAM 479
 Full Name (Last, First, Middle Initial)
 Mailing Address 5192 N 900 E
 City OTTERBEIN State IN Zip Code 47970
 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
 12 / 17 / 2013
Transaction ID : SA11Al.100870
 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 134 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR VIRGIL F COTTRILL 456
 Full Name (Last, First, Middle Initial)
 Mailing Address 72376 COTTRILL RD
 City State Zip Code
 WILKESVILLE OH 45695
 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
 10 / 01 / 2013
Transaction ID : SA11AI.100876
 Amount of Each Receipt this Period
 50.00

B. MR RICHARD E COUCH 244
 Full Name (Last, First, Middle Initial)
 Mailing Address 13803 BIRDAVEN LN
 City State Zip Code
 GROTTUES VA 24441
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MACHINE OPERATOR MACHINE OPERATOR
 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
 12 / 11 / 2013
Transaction ID : SA11AI.100882
 Amount of Each Receipt this Period
 100.00

C. MS JUDITH M COURI 531
 Full Name (Last, First, Middle Initial)
 Mailing Address 1215 SEITZ DR
 City State Zip Code
 WAUKESHA WI 53186
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 COURI INSURANCE Ceo
 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 / 16 / 2013
Transaction ID : SA11AI.100922
 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 135 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS JUDITH M COURI 531
 Full Name (Last, First, Middle Initial)
 Mailing Address 1215 SEITZ DR
 City WAUKESHA State WI Zip Code 53186
 FEC ID number of contributing federal political committee. **C**
 Name of Employer COURI INSURANCE Occupation Ceo
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 27 / 2013
Transaction ID : SA11AI.100919
 Amount of Each Receipt this Period
 25.00

B. MS JUDITH M COURI 531
 Full Name (Last, First, Middle Initial)
 Mailing Address 1215 SEITZ DR
 City WAUKESHA State WI Zip Code 53186
 FEC ID number of contributing federal political committee. **C**
 Name of Employer COURI INSURANCE Occupation Ceo
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : SA11AI.100921
 Amount of Each Receipt this Period
 100.00

C. MS JUDITH M COURI 531
 Full Name (Last, First, Middle Initial)
 Mailing Address 1215 SEITZ DR
 City WAUKESHA State WI Zip Code 53186
 FEC ID number of contributing federal political committee. **C**
 Name of Employer COURI INSURANCE Occupation Ceo
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 22 / 2013
Transaction ID : SA11AI.143981
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 625.00
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 136 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS JUDITH M COURI 531
 Full Name (Last, First, Middle Initial)
 Mailing Address 1215 SEITZ DR
 City WAUKESHA State WI Zip Code 53186
 FEC ID number of contributing federal political committee. **C**
 Name of Employer COURI INSURANCE Occupation Ceo
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 975.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 27 / 2013
Transaction ID : SA11AI.100920
 Amount of Each Receipt this Period
 25.00

B. MS KRISTEN COURTNEY 488
 Full Name (Last, First, Middle Initial)
 Mailing Address 1298 SILVERWOOD DR
 City OKEMOS State MI Zip Code 48864
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation VIOLIONIST
 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 / 09 / 2013
Transaction ID : SA11AI.100937
 Amount of Each Receipt this Period
 300.00

C. MR GERALD COX 237
 Full Name (Last, First, Middle Initial)
 Mailing Address 201 BELLHAVEN RD
 City PORTSMOUTH State VA Zip Code 23702
 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
 11 / 01 / 2013
Transaction ID : SA11AI.100982
 Amount of Each Receipt this Period
 100.00

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 137 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

A. MR GERALD COX 237
 Full Name (Last, First, Middle Initial)
 Mailing Address 201 BELLHAVEN RD
 City PORTSMOUTH State VA Zip Code 23702
 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
 11 / 27 / 2013
Transaction ID : SA11Al.100985
 Amount of Each Receipt this Period
 50.00

B. MR GERALD COX 237
 Full Name (Last, First, Middle Initial)
 Mailing Address 201 BELLHAVEN RD
 City PORTSMOUTH State VA Zip Code 23702
 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
 12 / 09 / 2013
Transaction ID : SA11Al.100984
 Amount of Each Receipt this Period
 100.00

C. DR CHARLES E COX 336 MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 13628 DIAMOND HEAD DR
 City TAMPA State FL Zip Code 33624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GENERAL SURGURY Occupation SURGEON
 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
 08 / 14 / 2013
Transaction ID : SA11Al.101009
 Amount of Each Receipt this Period
 175.00

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 138 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS DOLORES A COX 356
 Full Name (Last, First, Middle Initial)
 Mailing Address 405 COTACO ST NW
 City RUSSELLVILLE State AL Zip Code 35653
 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 / 03 / 2013
Transaction ID : SA11Al.101014
 Amount of Each Receipt this Period
 150.00

B. MR JERRY COX 797
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 95
 City LENORAH State TX Zip Code 79749
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation PLUMBER
 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 / 17 / 2013
Transaction ID : SA11Al.101059
 Amount of Each Receipt this Period
 200.00

C. MR JERRY COX 797
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 95
 City LENORAH State TX Zip Code 79749
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation PLUMBER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2013
Transaction ID : SA11Al.101062
 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: PAGE 139 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MRS SANDY COX 797
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 LONG CHAMP CT
 City ODESSA State TX Zip Code 79762
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BENCHMARK PROPERTIES LLC Occupation PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 06 / 2013
Transaction ID : SA11Al.101063
 Amount of Each Receipt this Period
 75.00

B. MR JEROME D COYNE 463
 Full Name (Last, First, Middle Initial)
 Mailing Address 7825 W 400 N
 City MICHIGAN CITY State IN Zip Code 46360
 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
 07 / 08 / 2013
Transaction ID : SA11Al.101076
 Amount of Each Receipt this Period
 200.00

C. MR JEROME D COYNE 463
 Full Name (Last, First, Middle Initial)
 Mailing Address 7825 W 400 N
 City MICHIGAN CITY State IN Zip Code 46360
 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 ▼ 900.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 26 / 2013
Transaction ID : SA11Al.101078
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 525.00
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 140 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR JEROME D COYNE 463
 Full Name (Last, First, Middle Initial)
 Mailing Address 7825 W 400 N
 City MICHIGAN CITY State IN Zip Code 46360
 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 ▼ 1050.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2013
Transaction ID : SA11AI.144001
 Amount of Each Receipt this Period
 150.00

B. MR JEROME D COYNE 463
 Full Name (Last, First, Middle Initial)
 Mailing Address 7825 W 400 N
 City MICHIGAN CITY State IN Zip Code 46360
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2013
Transaction ID : SA11AI.101077
 Amount of Each Receipt this Period
 100.00

C. MR JEROME D COYNE 463
 Full Name (Last, First, Middle Initial)
 Mailing Address 7825 W 400 N
 City MICHIGAN CITY State IN Zip Code 46360
 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 ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2013
Transaction ID : SA11AI.101079
 Amount of Each Receipt this Period
 100.00

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: PAGE 141 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR DON L CRAMER 657
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 91
 City WILLARD State MO Zip Code 65781
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 15 / 2013
Transaction ID : SA11Al.101144
 Amount of Each Receipt this Period
 50.00

B. MRS PATRICIA R CRANSTON 940
 Full Name (Last, First, Middle Initial)
 Mailing Address 23460 CAMINO HERMOSO DR
 City LOS ALTOS State CA Zip Code 94024
 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 ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 18 / 2013
Transaction ID : SA11Al.101167
 Amount of Each Receipt this Period
 50.00

C. MS MARION CRAWLEY 356
 Full Name (Last, First, Middle Initial)
 Mailing Address 309 GERTRUDE ST
 City MUSCLE SHOALS State AL Zip Code 35661
 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
 12 / 16 / 2013
Transaction ID : SA11Al.101225
 Amount of Each Receipt this Period
 150.00

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 142 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR CURTIS F CRISP 723
 Full Name (Last, First, Middle Initial)
 Mailing Address 406 HARRIET AVE
 City State Zip Code
 ELAINE AR 72333
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CURTIS CRISP SELF EMPLOYED
 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
 10 / 28 / 2013
Transaction ID : SA11AI.101290
 Amount of Each Receipt this Period
 100.00

B. MR CURTIS F CRISP 723
 Full Name (Last, First, Middle Initial)
 Mailing Address 406 HARRIET AVE
 City State Zip Code
 ELAINE AR 72333
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CURTIS CRISP SELF EMPLOYED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2013
Transaction ID : SA11AI.101289
 Amount of Each Receipt this Period
 100.00

C. MS JANELL CRISWELL 166
 Full Name (Last, First, Middle Initial)
 Mailing Address 2106 LOWER CLOVER CREEK RD
 City State Zip Code
 WILLIAMSBURG PA 16693
 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
 12 / 17 / 2013
Transaction ID : SA11AI.101303
 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 143 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS KARLA T CROCKER 983
Full Name (Last, First, Middle Initial)

Mailing Address 19523 17TH STREET KP S

City LAKEBAY	State WA	Zip Code 98349
-----------------	-------------	-------------------

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
07	/	01	/	2013

Transaction ID : SA11AI.101321

Amount of Each Receipt this Period
25.00

B. MS KARLA T CROCKER 983
Full Name (Last, First, Middle Initial)

Mailing Address 19523 17TH STREET KP S

City LAKEBAY	State WA	Zip Code 98349
-----------------	-------------	-------------------

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	/	2013

Transaction ID : SA11AI.101320

Amount of Each Receipt this Period
25.00

C. MS KARLA T CROCKER 983
Full Name (Last, First, Middle Initial)

Mailing Address 19523 17TH STREET KP S

City LAKEBAY	State WA	Zip Code 98349
-----------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	30	/	2013

Transaction ID : SA11AI.101322

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....	75.00
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 144 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS COLLEEN M CRONK 727
 Full Name (Last, First, Middle Initial)
 Mailing Address 701 KINGSWOOD DR
 City State Zip Code
 ROGERS AR 72756
 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
 08 / 15 / 2013
Transaction ID : SA11Al.101346
 Amount of Each Receipt this Period
 25.00

B. MS COLLEEN M CRONK 727
 Full Name (Last, First, Middle Initial)
 Mailing Address 701 KINGSWOOD DR
 City State Zip Code
 ROGERS AR 72756
 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 M / D D D / Y Y Y Y Y Y
 09 / 23 / 2013
Transaction ID : SA11Al.101350
 Amount of Each Receipt this Period
 100.00

C. MS COLLEEN M CRONK 727
 Full Name (Last, First, Middle Initial)
 Mailing Address 701 KINGSWOOD DR
 City State Zip Code
 ROGERS AR 72756
 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 ▼
 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 11 / 2013
Transaction ID : SA11Al.101348
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
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 145 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS COLLEEN M CRONK 727
 Full Name (Last, First, Middle Initial)
 Mailing Address 701 KINGSWOOD DR
 City State Zip Code
 ROGERS AR 72756
 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
 11 / 14 / 2013
Transaction ID : SA11Al.101349
 Amount of Each Receipt this Period
 250.00

B. MR RANDY CRUMP 765
 Full Name (Last, First, Middle Initial)
 Mailing Address 1433 COUNTY ROAD 316
 City State Zip Code
 ROCKDALE TX 76567
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 ENERVEST ATTORNEY
 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
 11 / 19 / 2013
Transaction ID : SA11Al.101457
 Amount of Each Receipt this Period
 50.00

C. MR HENRY CUBBERLY 347
 Full Name (Last, First, Middle Initial)
 Mailing Address 119 POINSETTIA DR
 City State Zip Code
 LEESBURG FL 34788
 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 M / D D D / Y Y Y Y Y Y
 12 / 12 / 2013
Transaction ID : SA11Al.101482
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
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 146 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MARY D CUMMINS 625
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 3RD DR
 City State Zip Code
 DECATUR IL 62521
 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 ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : SA11Al.101542
 Amount of Each Receipt this Period
 20.00

B. MARY D CUMMINS 625
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 3RD DR
 City State Zip Code
 DECATUR IL 62521
 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
 11 / 14 / 2013
Transaction ID : SA11Al.101543
 Amount of Each Receipt this Period
 100.00

C. MS RUTH E CUNNINGHAM 532
 Full Name (Last, First, Middle Initial)
 Mailing Address 5704 W WASHINGTON BLVD
 City State Zip Code
 MILWAUKEE WI 53208
 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 ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2013
Transaction ID : SA11Al.101565
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 140.00
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 147 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR MICHAEL CURL 285
 Full Name (Last, First, Middle Initial)
 Mailing Address 128 ROCKS LN
 City NEWPORT State NC Zip Code 28570
 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
 12 / 30 / 2013
Transaction ID : SA11Al.101593
 Amount of Each Receipt this Period
 75.00

B. MR GEORGE CUSHING 151
 Full Name (Last, First, Middle Initial)
 Mailing Address 5350 SALTSBURG RD
 APT 301
 City VERONA State PA Zip Code 15147
 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 / D D / Y Y Y Y Y Y
 08 / 20 / 2013
Transaction ID : SA11Al.101648
 Amount of Each Receipt this Period
 150.00

C. MR GEORGE CUSHING 151
 Full Name (Last, First, Middle Initial)
 Mailing Address 5350 SALTSBURG RD
 APT 301
 City VERONA State PA Zip Code 15147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 20 / 2013
Transaction ID : SA11Al.101649
 Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00
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 148 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

A. MIKULAS CUTZ 331
Full Name (Last, First, Middle Initial)

Mailing Address 8855 COLLINS AVE
APT 1107

City SURFSIDE State FL Zip Code 33154

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
07 / 01 / 2013
Transaction ID : SA11Al.101662

Amount of Each Receipt this Period
50.00

B. MIKULAS CUTZ 331
Full Name (Last, First, Middle Initial)

Mailing Address 8855 COLLINS AVE
APT 1107

City SURFSIDE State FL Zip Code 33154

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
10 / 01 / 2013
Transaction ID : SA11Al.101661

Amount of Each Receipt this Period
50.00

C. MS 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 ▼
300.00

Date of Receipt
07 / 25 / 2013
Transaction ID : SA11Al.101847

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 149 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2013
Transaction ID : SA11AI.101848
 Amount of Each Receipt this Period
 100.00

B. MR JIM DARGAN 285
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 RUNNING BRANCH DR
 City HAVELOCK State NC Zip Code 28532
 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 / 18 / 2013
Transaction ID : SA11AI.101892
 Amount of Each Receipt this Period
 100.00

C. MR JIM DARGAN 285
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 RUNNING BRANCH DR
 City HAVELOCK State NC Zip Code 28532
 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
 10 / 29 / 2013
Transaction ID : SA11AI.101891
 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 150 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR DON DAUER 937
Full Name (Last, First, Middle Initial)

Mailing Address 2733 W PALO ALTO AVE

City FRESNO	State CA	Zip Code 93711
----------------	-------------	-------------------

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

Name of Employer DON DAUER INVESTMENTS	Occupation FINANCIAL ADVISOR
-------------------------------------------	---------------------------------

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
11	/	11	/	2013

Transaction ID : SA11Al.101945

Amount of Each Receipt this Period

325.00

B. MS SUSAN J DAVIS 145
Full Name (Last, First, Middle Initial)

Mailing Address 11096 PERRY RD

City PAVILION	State NY	Zip Code 14525
------------------	-------------	-------------------

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

Name of Employer NONE	Occupation SELF EMPLOYED
--------------------------	-----------------------------

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	/	18	/	2013

Transaction ID : SA11Al.102046

Amount of Each Receipt this Period

250.00

C. MS JANIS A DAVIS 325
Full Name (Last, First, Middle Initial)

Mailing Address 5084 MANDAVILLA BLVD

City GULF BREEZE	State FL	Zip Code 32563
---------------------	-------------	-------------------

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

Name of Employer SELF EMPLOYED	Occupation GENERAL CONTRACTOR
-----------------------------------	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2013

Transaction ID : SA11Al.102107

Amount of Each Receipt this Period

25.00

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: PAGE 151 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS JANIS A DAVIS 325
 Full Name (Last, First, Middle Initial)
 Mailing Address 5084 MANDAVILLA BLVD
 City State Zip Code
 GULF BREEZE FL 32563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF EMPLOYED GENERAL CONTRACTOR
 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
 12 / 04 / 2013
Transaction ID : SA11AI.102106
 Amount of Each Receipt this Period
 250.00

B. MS LOUISE G DAVIS 780
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 537
 City State Zip Code
 COTULLA TX 78014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE SELF EMPLOYED
 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 / 29 / 2013
Transaction ID : SA11AI.102192
 Amount of Each Receipt this Period
 175.00

C. MS LOUISE G DAVIS 780
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 537
 City State Zip Code
 COTULLA TX 78014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE SELF EMPLOYED
 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
 10 / 29 / 2013
Transaction ID : SA11AI.102193
 Amount of Each Receipt this Period
 175.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00
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 152 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. THEODORE C DAWSON 294
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 457

City MC CLELLANVILLE	State SC	Zip Code 29458
-------------------------	-------------	-------------------

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

Name of Employer MARINE CONSALTANT	Occupation SELF EMPLOYED
---------------------------------------	-----------------------------

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 / 30 / 2013
Transaction ID : SA11AI.102238

Amount of Each Receipt this Period
 100.00

B. MS JUDITH DAWSON 444
 Full Name (Last, First, Middle Initial)
 Mailing Address 430 POWERS AVE

City GIRARD	State OH	Zip Code 44420
----------------	-------------	-------------------

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 ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2013
Transaction ID : SA11AI.102240

Amount of Each Receipt this Period
 25.00

C. MS JUDITH DAWSON 444
 Full Name (Last, First, Middle Initial)
 Mailing Address 430 POWERS AVE

City GIRARD	State OH	Zip Code 44420
----------------	-------------	-------------------

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 ▼
255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2013
Transaction ID : SA11AI.102241

Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional).....▶	155.00
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 153 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MRS MARIE T DAY 837
 Full Name (Last, First, Middle Initial)
 Mailing Address 3603 W HILLCREST DR
 City BOISE State ID Zip Code 83705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 04 / 2013
Transaction ID : SA11AI.102275
 Amount of Each Receipt this Period
 150.00

B. MS SHARON K DEAKINS 743
 Full Name (Last, First, Middle Initial)
 Mailing Address 63800 E 300 RD
 City GROVE State OK Zip Code 74344
 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
 12 / 04 / 2013
Transaction ID : SA11AI.102309
 Amount of Each Receipt this Period
 150.00

C. MR BILL R DEATON 481
 Full Name (Last, First, Middle Initial)
 Mailing Address 14941 NOBIL AVE
 City MONROE State MI Zip Code 48161
 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 / 08 / 2013
Transaction ID : SA11AI.102358
 Amount of Each Receipt this Period
 100.00

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: (check only one)	PAGE 154 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR BILL R DEATON 481
 Full Name (Last, First, Middle Initial)
 Mailing Address 14941 NOBIL AVE
 City MONROE State MI Zip Code 48161
 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
 11 / 22 / 2013
Transaction ID : SA11AI.102359
 Amount of Each Receipt this Period
 100.00

B. MS PATRICIA DEFAZIO 088
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 AVENUE D
 City MONROE TOWNSHIP State NJ Zip Code 08831
 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 / 19 / 2013
Transaction ID : SA11AI.102420
 Amount of Each Receipt this Period
 150.00

C. MS KATHERINE E DELAHANTY 018
 Full Name (Last, First, Middle Initial)
 Mailing Address 96 OAK ST
 City METHUEN State MA Zip Code 01844
 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
 08 / 27 / 2013
Transaction ID : SA11AI.102481
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional).....▶	265.00
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 155 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS KATHERINE E DELAHANTY 018
 Full Name (Last, First, Middle Initial)
 Mailing Address 96 OAK ST
 City State Zip Code
 METHUEN MA 01844
 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 M / D D D / Y Y Y Y Y Y
 11 / 27 / 2013
Transaction ID : SA11AI.102482
 Amount of Each Receipt this Period
 15.00

B. MR JACK A DEMPSEY 287
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 1484
 City State Zip Code
 CASHIERS NC 28717
 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
 10 / 08 / 2013
Transaction ID : SA11AI.102589
 Amount of Each Receipt this Period
 35.00

C. MR JACK A DEMPSEY 287
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 1484
 City State Zip Code
 CASHIERS NC 28717
 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 ▼
 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 20 / 2013
Transaction ID : SA11AI.102590
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	75.00
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 156 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. EDWARD DENTON 894
Full Name (Last, First, Middle Initial)

Mailing Address 1709 LANTANA DR

City MINDEN State NV Zip Code 89423

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
 12 / 09 / 2013
Transaction ID : SA11AI.102668

Amount of Each Receipt this Period
 100.00

B. MS CAROL DEPIETRO 068
Full Name (Last, First, Middle Initial)

Mailing Address 60 NEW ST

City FAIRFIELD State CT Zip Code 06825

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

Name of Employer SOTHEBY'S INTL REALTY Occupation REAL ESTATE PROFESSIONAL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2013
Transaction ID : SA11AI.102679

Amount of Each Receipt this Period
 40.00

C. MRS LINDA E DERBER 548
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 699

City HAYWARD State WI Zip Code 54843

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
 12 / 11 / 2013
Transaction ID : SA11AI.102686

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 157 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR JOHN W DEVONSHIRE 870		Date of Receipt
Mailing Address 57 PORCUPINE TRL		<input type="text" value="07"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>
City	State	Zip Code
JEMEZ SPRINGS	NM	87025
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.102774
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<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="450.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MR JOHN W DEVONSHIRE 870		Date of Receipt
Mailing Address 57 PORCUPINE TRL		<input type="text" value="08"/> / <input type="text" value="29"/> / <input type="text" value="2013"/>
City	State	Zip Code
JEMEZ SPRINGS	NM	87025
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.102775
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<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="700.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MR JOHN W DEVONSHIRE 870		Date of Receipt
Mailing Address 57 PORCUPINE TRL		<input type="text" value="11"/> / <input type="text" value="21"/> / <input type="text" value="2013"/>
City	State	Zip Code
JEMEZ SPRINGS	NM	87025
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.102776
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<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="800.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="450.00"/>
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 158 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS BETH W DEWBERRY 300
 Full Name (Last, First, Middle Initial)
 Mailing Address 1705 GLENEDEN CT
 City GRAYSON State GA Zip Code 30017
 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 ▼ 420.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 14 / 2013
Transaction ID : SA11AI.102791
 Amount of Each Receipt this Period
 100.00

B. MRS MADELYN DEXTER 778
 Full Name (Last, First, Middle Initial)
 Mailing Address 4721 STONEBRIAR CIR
 City COLLEGE STATION State TX Zip Code 77845
 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
 10 / 08 / 2013
Transaction ID : SA11AI.102804
 Amount of Each Receipt this Period
 100.00

C. MS LILLY DIAMOND 800
 Full Name (Last, First, Middle Initial)
 Mailing Address 14130 E PROGRESS CT
 City AURORA State CO Zip Code 80015
 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 ▼ 285.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : SA11AI.102831
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
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 159 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS MELINDA A DICKERSON 450		Date of Receipt
Mailing Address 3101 MILTON RD		<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2013"/>
City	State	Zip Code
MIDDLETOWN	OH	45042
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.102869
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="450.00"/>	

Full Name (Last, First, Middle Initial) B. MS MELINDA A DICKERSON 450		Date of Receipt
Mailing Address 3101 MILTON RD		<input type="text" value="09"/> / <input type="text" value="16"/> / <input type="text" value="2013"/>
City	State	Zip Code
MIDDLETOWN	OH	45042
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.102870
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<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="750.00"/>	

Full Name (Last, First, Middle Initial) C. MS MELINDA A DICKERSON 450		Date of Receipt
Mailing Address 3101 MILTON RD		<input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2013"/>
City	State	Zip Code
MIDDLETOWN	OH	45042
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.102868
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="850.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="450.00"/>
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 160 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS MELINDA A DICKERSON 450		Date of Receipt
Mailing Address 3101 MILTON RD		<input type="text" value="12"/> / <input type="text" value="16"/> / <input type="text" value="2013"/>
City	State	Zip Code
MIDDLETOWN	OH	45042
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.102866
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<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="1150.00"/>	

Full Name (Last, First, Middle Initial) B. MS MELINDA A DICKERSON 450		Date of Receipt
Mailing Address 3101 MILTON RD		<input type="text" value="12"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>
City	State	Zip Code
MIDDLETOWN	OH	45042
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.102867
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="1250.00"/>	

Full Name (Last, First, Middle Initial) C. MR HENRY A DIEDERICHS 455		Date of Receipt
Mailing Address 252 N BROADMOOR BLVD		<input type="text" value="12"/> / <input type="text" value="04"/> / <input type="text" value="2013"/>
City	State	Zip Code
SPRINGFIELD	OH	45504
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.102920
Name of Employer	Occupation	Amount of Each Receipt this Period
SELF EMPLOYED	PHYSICIAN	<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="225.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="425.00"/>
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 161 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS ROXANN B DILLON 240
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 549
 City BASSETT State VA Zip Code 24055
 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
 07 / 08 / 2013
Transaction ID : SA11AI.102993
 Amount of Each Receipt this Period
 150.00

B. MS ROXANN B DILLON 240
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 549
 City BASSETT State VA Zip Code 24055
 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
 09 / 18 / 2013
Transaction ID : SA11AI.102991
 Amount of Each Receipt this Period
 250.00

C. MS ROXANN B DILLON 240
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 549
 City BASSETT State VA Zip Code 24055
 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 ▼ 775.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 08 / 2013
Transaction ID : SA11AI.102992
 Amount of Each Receipt this Period
 150.00

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 162 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS KATHLEEN M DISTRO 082
 Full Name (Last, First, Middle Initial)
 Mailing Address 328 E 26TH AVE
 City WILDWOOD State NJ Zip Code 08260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer VACATION RENTALS 2U.COM Occupation SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 10 / 2013
Transaction ID : SA11AI.103048
 Amount of Each Receipt this Period
 150.00

B. MS TAMMY DOCKTER 806
 Full Name (Last, First, Middle Initial)
 Mailing Address 225 N 55TH AVE
 City GREELEY State CO Zip Code 80634
 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 ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2013
Transaction ID : SA11AI.103122
 Amount of Each Receipt this Period
 75.00

C. MS TAMMY DOCKTER 806
 Full Name (Last, First, Middle Initial)
 Mailing Address 225 N 55TH AVE
 City GREELEY State CO Zip Code 80634
 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 ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 07 / 2013
Transaction ID : SA11AI.103123
 Amount of Each Receipt this Period
 50.00

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: PAGE 163 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS TAMMY DOCKTER 806
 Full Name (Last, First, Middle Initial)
 Mailing Address 225 N 55TH AVE
 City State Zip Code
 GREELEY CO 80634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE HOMEMAKER
 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
 11 / 25 / 2013
Transaction ID : SA11AI.103124
 Amount of Each Receipt this Period
 50.00

B. MS JOAN C DONALDSON 922
 Full Name (Last, First, Middle Initial)
 Mailing Address 42621 CAPRI DR
 City State Zip Code
 BERMUDA DUNES CA 92203
 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
 10 / 18 / 2013
Transaction ID : SA11AI.103227
 Amount of Each Receipt this Period
 100.00

C. MR DONALD F DOODY 130
 Full Name (Last, First, Middle Initial)
 Mailing Address 5541 LARGE RD
 City State Zip Code
 AUBURN NY 13021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 DOODY FARMS FARMER
 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 / 10 / 2013
Transaction ID : SA11AI.103278
 Amount of Each Receipt this Period
 100.00

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 164 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR DONALD F DOODY 130
 Full Name (Last, First, Middle Initial)
 Mailing Address 5541 LARGE RD
 City AUBURN State NY Zip Code 13021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DOODY FARMS Occupation FARMER
 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 / 13 / 2013
Transaction ID : SA11AI.103277
 Amount of Each Receipt this Period
 100.00

B. MR DONALD F DOODY 130
 Full Name (Last, First, Middle Initial)
 Mailing Address 5541 LARGE RD
 City AUBURN State NY Zip Code 13021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DOODY FARMS Occupation FARMER
 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
 12 / 13 / 2013
Transaction ID : SA11AI.103276
 Amount of Each Receipt this Period
 100.00

C. MR MERRILL DOWNS 843
 Full Name (Last, First, Middle Initial)
 Mailing Address 496 W 100 S
 City SMITHFIELD State UT Zip Code 84335
 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
 10 / 28 / 2013
Transaction ID : SA11AI.103443
 Amount of Each Receipt this Period
 150.00

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 165 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR AL DREWETT 714
 Full Name (Last, First, Middle Initial)
 Mailing Address 13610 TEXAS HWY
 City MANY State LA Zip Code 71449
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TOLEDO FIBERGLASS Occupation BOAT BUILDERE
 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 / 23 / 2013
Transaction ID : SA11Al.103534
 Amount of Each Receipt this Period
 100.00

B. MR ROBERT DUDLEY 335
 Full Name (Last, First, Middle Initial)
 Mailing Address 37240 MARSHALL DR
 City DADE CITY State FL Zip Code 33523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer WITHLACOOCHEE ELETRIC COOPERAT Occupation UTILITY EMPLOYEE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2013
Transaction ID : SA11Al.103638
 Amount of Each Receipt this Period
 100.00

C. MR JOSEPH N DUGAN 254
 Full Name (Last, First, Middle Initial)
 Mailing Address 2771 BUTLERS CHAPEL RD
 City MARTINSBURG State WV Zip Code 25403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 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 / 2013
Transaction ID : SA11Al.103676
 Amount of Each Receipt this Period
 150.00

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: PAGE 166 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR JOSEPH N DUGAN 254
 Full Name (Last, First, Middle Initial)
 Mailing Address 2771 BUTLERS CHAPEL RD
 City MARTINSBURG State WV Zip Code 25403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 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 / 27 / 2013
Transaction ID : SA11AI.103677
 Amount of Each Receipt this Period
 100.00

B. MR JOHN DUGAN 852
 Full Name (Last, First, Middle Initial)
 Mailing Address 464 S ROANOKE
 City MESA State AZ Zip Code 85206
 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 / 11 / 2013
Transaction ID : SA11AI.103683
 Amount of Each Receipt this Period
 100.00

C. MR JOHN DUGAN 852
 Full Name (Last, First, Middle Initial)
 Mailing Address 464 S ROANOKE
 City MESA State AZ Zip Code 85206
 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
 10 / 11 / 2013
Transaction ID : SA11AI.103684
 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 167 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR JOHN DUGAN 852
 Full Name (Last, First, Middle Initial)
 Mailing Address 464 S ROANOKE
 City MESA State AZ Zip Code 85206
 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
 11 / 18 / 2013
Transaction ID : SA11Al.103682
 Amount of Each Receipt this Period
 100.00

B. MS COLLEEN R DUKE 795
 Full Name (Last, First, Middle Initial)
 Mailing Address 2008 COUNTY ROAD 137
 City SNYDER State TX Zip Code 79549
 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 ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2013
Transaction ID : SA11Al.103702
 Amount of Each Receipt this Period
 100.00

C. MS LOIS S DUMONT 598
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 593
 City SAINT IGNATIUS State MT Zip Code 59865
 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 / 19 / 2013
Transaction ID : SA11Al.103728
 Amount of Each Receipt this Period
 75.00

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: PAGE 168 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR STEPHEN DUNBECK 018
 Full Name (Last, First, Middle Initial)
 Mailing Address 10 ARCADIA RD
 City BILLERICA State MA Zip Code 01821
 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 / 12 / 2013
Transaction ID : SA11AI.103740
 Amount of Each Receipt this Period
 50.00

B. MR STEPHEN DUNBECK 018
 Full Name (Last, First, Middle Initial)
 Mailing Address 10 ARCADIA RD
 City BILLERICA State MA Zip Code 01821
 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 / 12 / 2013
Transaction ID : SA11AI.103742
 Amount of Each Receipt this Period
 50.00

C. MR STEPHEN DUNBECK 018
 Full Name (Last, First, Middle Initial)
 Mailing Address 10 ARCADIA RD
 City BILLERICA State MA Zip Code 01821
 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
 12 / 30 / 2013
Transaction ID : SA11AI.103741
 Amount of Each Receipt this Period
 50.00

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 169 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS JOANNE DUNCALF 505
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 533
 City CLARION State IA Zip Code 50525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PLATINUM SERVICE Occupation CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **12 / 16 / 2013**
Transaction ID : SA11AI.103744
 Amount of Each Receipt this Period **50.00**

B. MR BRUCE A DUNLOP 010
 Full Name (Last, First, Middle Initial)
 Mailing Address 66 CHRISTOPHER DR
 City WESTFIELD State MA Zip Code 01085
 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 **07 / 03 / 2013**
Transaction ID : SA11AI.103791
 Amount of Each Receipt this Period **25.00**

C. MR BRUCE A DUNLOP 010
 Full Name (Last, First, Middle Initial)
 Mailing Address 66 CHRISTOPHER DR
 City WESTFIELD State MA Zip Code 01085
 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 **10 / 03 / 2013**
Transaction ID : SA11AI.103793
 Amount of Each Receipt this Period **25.00**

SUBTOTAL of Receipts This Page (optional)..... **100.00**
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 170 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR BRUCE A DUNLOP 010
 Full Name (Last, First, Middle Initial)
 Mailing Address 66 CHRISTOPHER DR
 City WESTFIELD State MA Zip Code 01085
 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
 12 / 16 / 2013
Transaction ID : SA11AI.103792
 Amount of Each Receipt this Period
 50.00

B. MS ELSIE R DUNN 810
 Full Name (Last, First, Middle Initial)
 Mailing Address 3100 DAWNS LN
 City LAMAR State CO Zip Code 81052
 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
 10 / 10 / 2013
Transaction ID : SA11AI.103827
 Amount of Each Receipt this Period
 50.00

C. MS ELSIE R DUNN 810
 Full Name (Last, First, Middle Initial)
 Mailing Address 3100 DAWNS LN
 City LAMAR State CO Zip Code 81052
 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
 11 / 04 / 2013
Transaction ID : SA11AI.103828
 Amount of Each Receipt this Period
 50.00

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: PAGE 171 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS AMELIA DURAN 782
 Full Name (Last, First, Middle Initial)
 Mailing Address 13614 BARSAN RD
 City SAN ANTONIO State TX Zip Code 78249
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NEWSPAPER Occupation JOURNALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 16 / 2013
Transaction ID : SA11Al.103868
 Amount of Each Receipt this Period
 100.00

B. MS AMELIA DURAN 782
 Full Name (Last, First, Middle Initial)
 Mailing Address 13614 BARSAN RD
 City SAN ANTONIO State TX Zip Code 78249
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NEWSPAPER Occupation JOURNALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 16 / 2013
Transaction ID : SA11Al.103870
 Amount of Each Receipt this Period
 100.00

C. MS BETTY F DUTTON 711
 Full Name (Last, First, Middle Initial)
 Mailing Address 3936 GILBERT DR
 City SHREVEPORT State LA Zip Code 71106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 13 / 2013
Transaction ID : SA11Al.103924
 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**

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FOR LINE NUMBER: PAGE 172 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR MICHAEL DYMOND 434
 Full Name (Last, First, Middle Initial)
 Mailing Address 1440 COUNTY ROAD 9
 City State Zip Code
 FREMONT OH 43420
 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
 11 / 19 / 2013
Transaction ID : SA11AI.104006
 Amount of Each Receipt this Period
 250.00

B. MR EDDIE R DYSON 775
 Full Name (Last, First, Middle Initial)
 Mailing Address 204 COUNTY ROAD 6763
 City State Zip Code
 DAYTON TX 77535
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 K&E MANAGER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 26 / 2013
Transaction ID : SA11AI.104016
 Amount of Each Receipt this Period
 150.00

C. MS ELIZABETH P DZURNAK 067
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 WEAVER ST
 City State Zip Code
 TORRINGTON CT 06790
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 15 / 2013
Transaction ID : SA11AI.104024
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

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

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FOR LINE NUMBER: PAGE 173 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS ELIZABETH P DZURNAK 067
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 WEAVER ST
 City TORRINGTON State CT Zip Code 06790
 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
 10 / 15 / 2013
Transaction ID : SA11AI.104026
 Amount of Each Receipt this Period
 50.00

B. MS ELIZABETH P DZURNAK 067
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 WEAVER ST
 City TORRINGTON State CT Zip Code 06790
 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
 12 / 16 / 2013
Transaction ID : SA11AI.104025
 Amount of Each Receipt this Period
 75.00

C. MS BEVERLY C EASTON 800
 Full Name (Last, First, Middle Initial)
 Mailing Address 7448 CANOSA CT
 City WESTMINSTER State CO Zip Code 80030
 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 ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 27 / 2013
Transaction ID : SA11AI.104106
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
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 174 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR JASON I ECKFORD 229 JR
 Full Name (Last, First, Middle Initial)
 Mailing Address 311 EDNAM DR
 City CHARLOTTEVALE State VA Zip Code 22903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ECKFORD FINANCIAL SERVICES 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
 10 / 15 / 2013
Transaction ID : SA11AI.104176
 Amount of Each Receipt this Period
 200.00

B. MR SIMON C ECKLUND 283
 Full Name (Last, First, Middle Initial)
 Mailing Address 72 SKIPPING WATER DR
 City SPRING LAKE State NC Zip Code 28390
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2013
Transaction ID : SA11AI.104182
 Amount of Each Receipt this Period
 50.00

C. MR SIMON C ECKLUND 283
 Full Name (Last, First, Middle Initial)
 Mailing Address 72 SKIPPING WATER DR
 City SPRING LAKE State NC Zip Code 28390
 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2013
Transaction ID : SA11AI.104181
 Amount of Each Receipt this Period
 100.00

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: PAGE 175 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR EDWARD L EDEN 810
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 20194
 City COLO CITY State CO Zip Code 81019
 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 / 2013
Transaction ID : SA11AI.104216
 Amount of Each Receipt this Period
 100.00

B. MS LOIS S 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 ▼ 920.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 10 / 2013
Transaction ID : SA11AI.104228
 Amount of Each Receipt this Period
 500.00

C. MS LOIS S 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 ▼ 970.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 14 / 2013
Transaction ID : SA11AI.104226
 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 176 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS LOIS S 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 ▼ 1070.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 24 / 2013
Transaction ID : SA11Al.104227
 Amount of Each Receipt this Period
 100.00

B. MR ROBBIE N EDMONSON 757
 Full Name (Last, First, Middle Initial)
 Mailing Address 12165 COUNTY ROAD 215
 City TYLER State TX Zip Code 75707
 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
 11 / 15 / 2013
Transaction ID : SA11Al.104251
 Amount of Each Receipt this Period
 100.00

C. MS JOAN M EDSON 494
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 145
 City HUDSONVILLE State MI Zip Code 49426
 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 ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 18 / 2013
Transaction ID : SA11Al.104257
 Amount of Each Receipt this Period
 40.00

SUBTOTAL of Receipts This Page (optional).....▶	240.00
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 177 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS WILMA M EDWARDS 920
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 2948
 City DEL MAR State CA Zip Code 92014
 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 / 15 / 2013
Transaction ID : SA11AI.104311
 Amount of Each Receipt this Period
 100.00

B. MS WILMA M EDWARDS 920
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 2948
 City DEL MAR State CA Zip Code 92014
 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
 11 / 27 / 2013
Transaction ID : SA11AI.144272
 Amount of Each Receipt this Period
 200.00

C. MS DANNIELLE M EDWARDS 975
 Full Name (Last, First, Middle Initial)
 Mailing Address 195 TIMBERLAKE DR
 City ASHLAND State OR Zip Code 97520
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2013
Transaction ID : SA11AI.104319
 Amount of Each Receipt this Period
 100.00

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 178 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS DANNIELLE M EDWARDS 975
 Full Name (Last, First, Middle Initial)
 Mailing Address 195 TIMBERLAKE DR
 City ASHLAND State OR Zip Code 97520
 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
 10 / 14 / 2013
Transaction ID : SA11Al.104318
 Amount of Each Receipt this Period
 100.00

B. MS DANNIELLE M EDWARDS 975
 Full Name (Last, First, Middle Initial)
 Mailing Address 195 TIMBERLAKE DR
 City ASHLAND State OR Zip Code 97520
 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
 11 / 28 / 2013
Transaction ID : SA11Al.104320
 Amount of Each Receipt this Period
 50.00

C. MR JAMES J EHRESMAN 448
 Full Name (Last, First, Middle Initial)
 Mailing Address 6799 MARSH RD
 City NEW WASHINGTON State OH Zip Code 44854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer JAMES J EHRESMAN CO Occupation BUSINESS OWNER
 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 / 2013
Transaction ID : SA11Al.104364
 Amount of Each Receipt this Period
 150.00

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 179 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS ALICE F EHRMAN 467
Full Name (Last, First, Middle Initial)

Mailing Address 2951 W US HIGHWAY 224

City DECATUR State IN Zip Code 46733

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
 11 / 06 / 2013
Transaction ID : SA11Al.104367

Amount of Each Receipt this Period
 50.00

B. MS ALICE F EHRMAN 467
Full Name (Last, First, Middle Initial)

Mailing Address 2951 W US HIGHWAY 224

City DECATUR State IN Zip Code 46733

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 ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2013
Transaction ID : SA11Al.104365

Amount of Each Receipt this Period
 40.00

C. MS BEVERLY ELKINS 708
Full Name (Last, First, Middle Initial)

Mailing Address 739 DAVENTRY DR

City BATON ROUGE State LA Zip Code 70808

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 ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2013
Transaction ID : SA11Al.104437

Amount of Each Receipt this Period
 100.00

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: PAGE 180 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial)
A. David Elliott 752

Mailing Address 7371 LANE PARK CT

City State Zip Code
Dallas TX 75225

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

Name of Employer Occupation
SELF EMPLOYED 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 / 06 / 2013
Transaction ID : SA11AI.144287

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. MS SARA M EMERY 376

Mailing Address 5740 CHESTNUT HILLS DR

City State Zip Code
KINGSPORT TN 37664

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
 08 / 26 / 2013
Transaction ID : SA11AI.104580

Amount of Each Receipt this Period
125.00

Full Name (Last, First, Middle Initial)
C. MR HENRY EMMERLING 081

Mailing Address 719 PARK AVE

City State Zip Code
COLLINGSWOOD NJ 08108

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 ▼
215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2013
Transaction ID : SA11AI.144303

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 660.00

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 181 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

A. MR HENRY EMMERLING 081
 Full Name (Last, First, Middle Initial)
 Mailing Address 719 PARK AVE
 City COLLINGSWOOD State NJ Zip Code 08108
 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
 12 / 19 / 2013
Transaction ID : SA11AI.104597
 Amount of Each Receipt this Period
 50.00

B. MS JOAN M EMMERT 038
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 95
 City HAMPSTEAD State NH Zip Code 03841
 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 / 08 / 2013
Transaction ID : SA11AI.104604
 Amount of Each Receipt this Period
 25.00

C. MS JOAN M EMMERT 038
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 95
 City HAMPSTEAD State NH Zip Code 03841
 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
 08 / 23 / 2013
Transaction ID : SA11AI.104603
 Amount of Each Receipt this Period
 75.00

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 182 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS JOAN M EMMERT 038
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 95

City HAMPSTEAD State NH Zip Code 03841

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
 10 / 07 / 2013

Transaction ID : SA11AI.104602

Amount of Each Receipt this Period
25.00

B. MS JOAN M EMMERT 038
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 95

City HAMPSTEAD State NH Zip Code 03841

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 ▼ **525.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2013

Transaction ID : SA11AI.104601

Amount of Each Receipt this Period
100.00

C. DR RICHARD EMMETT 214 MD
Full Name (Last, First, Middle Initial)

Mailing Address 15 JEREMYS WAY

City ANNAPOLIS State MD Zip Code 21403

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 ▼ **225.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 27 / 2013

Transaction ID : SA11AI.104609

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 183 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. DR RICHARD EMMETT 214 MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 15 JEREMYS WAY
 City ANNAPOLIS State MD Zip Code 21403
 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 ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 27 / 2013
Transaction ID : SA11AI.104610
 Amount of Each Receipt this Period
 250.00

B. William Emmons 774
 Full Name (Last, First, Middle Initial)
 Mailing Address 223 Terrace Creek Ct
 City Richmond State TX Zip Code 77406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Brunel Int Occupation Manager
 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 / 12 / 2013
Transaction ID : SA11AI.144307
 Amount of Each Receipt this Period
 250.00

C. MS MICHELLE M ENDRES 334
 Full Name (Last, First, Middle Initial)
 Mailing Address 840 OCEAN DR APT PHC
 City NORTH PALM BEACH State FL Zip Code 33408
 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
 12 / 11 / 2013
Transaction ID : SA11AI.104629
 Amount of Each Receipt this Period
 225.00

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 184 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR PATRICK ENRICO 937
 Full Name (Last, First, Middle Initial)
 Mailing Address 577 E AHWAHNEE AVE
 City FRESNO State CA Zip Code 93720
 Date of Receipt 09 / 06 / 2013
Transaction ID : SA11Al.104692
 Amount of Each Receipt this Period 200.00
 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

B. MS LUCILLE ERDAHL 986
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 1773
 City BATTLE GROUND State WA Zip Code 98604
 Date of Receipt 07 / 25 / 2013
Transaction ID : SA11Al.104724
 Amount of Each Receipt this Period 100.00
 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

C. MR RAY ERDNANN 953
 Full Name (Last, First, Middle Initial)
 Mailing Address 410 COLORADO AVE
 City MODESTO State CA Zip Code 95351
 Date of Receipt 07 / 11 / 2013
Transaction ID : SA11Al.104727
 Amount of Each Receipt this Period 40.00
 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

SUBTOTAL of Receipts This Page (optional)..... ▶ 340.00
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 185 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR RAY ERDNANN 953		Date of Receipt
Mailing Address 410 COLORADO AVE		<input type="text" value="08"/> / <input type="text" value="29"/> / <input type="text" value="2013"/>
City	State	Zip Code
MODESTO	CA	95351
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.104729
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<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="280.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MR RAY ERDNANN 953		Date of Receipt
Mailing Address 410 COLORADO AVE		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2013"/>
City	State	Zip Code
MODESTO	CA	95351
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.104728
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<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="320.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MS LOUISE E ERWIN 770		Date of Receipt
Mailing Address 4718 HALLMARK DR APT 401		<input type="text" value="08"/> / <input type="text" value="09"/> / <input type="text" value="2013"/>
City	State	Zip Code
HOUSTON	TX	77056
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.104781
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<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="235.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="140.00"/>
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 186 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS LOUISE E ERWIN 770
 Full Name (Last, First, Middle Initial)
 Mailing Address 4718 HALLMARK DR
 APT 401
 City HOUSTON State TX Zip Code 77056
 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 ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 18 / 2013
Transaction ID : SA11Al.104783
 Amount of Each Receipt this Period
 50.00

B. MS GLADYS M ESDENSHADE 175
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 337
 City PARADISE State PA Zip Code 17562
 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
 12 / 04 / 2013
Transaction ID : SA11Al.104790
 Amount of Each Receipt this Period
 50.00

C. MS OPAL ESTES 982
 Full Name (Last, First, Middle Initial)
 Mailing Address 4423 130TH PL NE
 City MARYSVILLE State WA Zip Code 98271
 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
 11 / 25 / 2013
Transaction ID : SA11Al.104841
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional).....▶	130.00
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 187 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS LINDA ESTRADA 988
 Full Name (Last, First, Middle Initial)
 Mailing Address 1009 LAGUNA DR
 City MOSES LAKE State WA Zip Code 98837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation CARE GIVER
 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
 11 / 20 / 2013
Transaction ID : SA11AI.104852
 Amount of Each Receipt this Period
 50.00

B. MR DAVID EUBANK 995
 Full Name (Last, First, Middle Initial)
 Mailing Address 200 W 34TH AVE
 City ANCHORAGE State AK Zip Code 99503
 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 ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2013
Transaction ID : SA11AI.104870
 Amount of Each Receipt this Period
 150.00

C. MS LORETTA M EVANS 037
 Full Name (Last, First, Middle Initial)
 Mailing Address 202 LANG RD
 City CORNISH State NH Zip Code 03745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer EVANS ENTERPRISES Occupation BUSINESS WOMAN
 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 / 12 / 2013
Transaction ID : SA11AI.104893
 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 188 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS MARY JOYCEANN EVANS 129
 Full Name (Last, First, Middle Initial)
 Mailing Address 33 EVANS LN
 City LAKE PLACID State NY Zip Code 12946
 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 ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 16 / 2013
Transaction ID : SA11AI.104895
 Amount of Each Receipt this Period
 250.00

B. MS MARY JOYCEANN EVANS 129
 Full Name (Last, First, Middle Initial)
 Mailing Address 33 EVANS LN
 City LAKE PLACID State NY Zip Code 12946
 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 ▼ 1450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2013
Transaction ID : SA11AI.104896
 Amount of Each Receipt this Period
 250.00

C. MR WALTER EVANS 700
 Full Name (Last, First, Middle Initial)
 Mailing Address 4720 SHERIDAN AVE
 City METAIRIE State LA Zip Code 70002
 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 / 12 / 2013
Transaction ID : SA11AI.104929
 Amount of Each Receipt this Period
 50.00

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 189 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR WALTER EVANS 700
 Full Name (Last, First, Middle Initial)
 Mailing Address 4720 SHERIDAN AVE
 City METAIRIE State LA Zip Code 70002
 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
 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2013
Transaction ID : SA11AI.104925
 Amount of Each Receipt this Period
 50.00

B. MR WALTER EVANS 700
 Full Name (Last, First, Middle Initial)
 Mailing Address 4720 SHERIDAN AVE
 City METAIRIE State LA Zip Code 70002
 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 ▼ 355.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 11 / 2013
Transaction ID : SA11AI.104930
 Amount of Each Receipt this Period
 25.00

C. MS MARJORIE P EVANS 710
 Full Name (Last, First, Middle Initial)
 Mailing Address 12942 HIGHWAY 171
 City MANSFIELD State LA Zip Code 71052
 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
 08 / 29 / 2013
Transaction ID : SA11AI.104932
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
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 190 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS MARJORIE P EVANS 710
 Full Name (Last, First, Middle Initial)
 Mailing Address 12942 HIGHWAY 171
 City MANSFIELD State LA Zip Code 71052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 01 / 2013
Transaction ID : SA11AI.104933
 Amount of Each Receipt this Period
 25.00

B. MR LELAND EVERTON 762
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 915
 City DECATUR State TX Zip Code 76234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE SELF EMPLOYED
 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 / 26 / 2013
Transaction ID : SA11AI.104998
 Amount of Each Receipt this Period
 100.00

C. MR LELAND EVERTON 762
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 915
 City DECATUR State TX Zip Code 76234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE SELF EMPLOYED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 27 / 2013
Transaction ID : SA11AI.104999
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
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 191 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. CMDR ROBERT C FAILMEZGER 130
 Full Name (Last, First, Middle Initial)
 Mailing Address 105 CAMMOT LN
 City FAYETTEVILLE State NY Zip Code 13066
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ATTORNEY Occupation SELF EMPLOYED
 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 / 07 / 2013
Transaction ID : SA11AI.105070
 Amount of Each Receipt this Period
 150.00

B. MS ANGIE B FAILS 276
 Full Name (Last, First, Middle Initial)
 Mailing Address 1004 SCHAUB DR
 City RALEIGH State NC Zip Code 27606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 12 / 2013
Transaction ID : SA11AI.105071
 Amount of Each Receipt this Period
 350.00

C. MS ANGIE B FAILS 276
 Full Name (Last, First, Middle Initial)
 Mailing Address 1004 SCHAUB DR
 City RALEIGH State NC Zip Code 27606
 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 ▼ 825.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 19 / 2013
Transaction ID : SA11AI.105072
 Amount of Each Receipt this Period
 100.00

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 192 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MRS ISIDORA FARIAS 785
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 836
 City PHARR State TX Zip Code 78577
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 VIP HOME HEALTH CARE INC HEALTH CARE
 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 / 16 / 2013
Transaction ID : SA11AI.105154
 Amount of Each Receipt this Period
 50.00

B. MRS ISIDORA FARIAS 785
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 836
 City PHARR State TX Zip Code 78577
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 VIP HOME HEALTH CARE INC HEALTH CARE
 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 / 27 / 2013
Transaction ID : SA11AI.105152
 Amount of Each Receipt this Period
 -50.00

C. MRS ISIDORA FARIAS 785
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 836
 City PHARR State TX Zip Code 78577
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 VIP HOME HEALTH CARE INC HEALTH CARE
 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
 11 / 18 / 2013
Transaction ID : SA11AI.105153
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 100.00
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 193 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS BETTY FARMER 374
 Full Name (Last, First, Middle Initial)
 Mailing Address 1121 SADDLEBROOK DR
 City CHATTANOOGA State TN Zip Code 37405
 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
 07 / 03 / 2013
Transaction ID : SA11AI.105175
 Amount of Each Receipt this Period
 150.00

B. MS BETTY FARMER 374
 Full Name (Last, First, Middle Initial)
 Mailing Address 1121 SADDLEBROOK DR
 City CHATTANOOGA State TN Zip Code 37405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 20 / 2013
Transaction ID : SA11AI.105176
 Amount of Each Receipt this Period
 100.00

C. MR DON M FARMER 679
 Full Name (Last, First, Middle Initial)
 Mailing Address 606 S MADISON ST
 City HUGOTON State KS Zip Code 67951
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REFUSED Occupation REFUSED
 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 / 10 / 2013
Transaction ID : SA11AI.105185
 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 194 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR DON M FARMER 679
 Full Name (Last, First, Middle Initial)
 Mailing Address 606 S MADISON ST
 City HUGOTON State KS Zip Code 67951
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REFUSED Occupation REFUSED
 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
 11 / 06 / 2013
Transaction ID : SA11AI.105184
 Amount of Each Receipt this Period
 50.00

B. MR DON M FARMER 679
 Full Name (Last, First, Middle Initial)
 Mailing Address 606 S MADISON ST
 City HUGOTON State KS Zip Code 67951
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REFUSED Occupation REFUSED
 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
 12 / 11 / 2013
Transaction ID : SA11AI.105183
 Amount of Each Receipt this Period
 35.00

C. MRS SYLVIA FERRELL 301
 Full Name (Last, First, Middle Initial)
 Mailing Address 303 WILSON DR
 City CARROLLTON State GA Zip Code 30117
 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
 09 / 24 / 2013
Transaction ID : SA11AI.105454
 Amount of Each Receipt this Period
 50.00

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 195 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MRS SYLVIA FERRELL 301
 Full Name (Last, First, Middle Initial)
 Mailing Address 303 WILSON DR
 City CARROLLTON State GA Zip Code 30117
 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 ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2013
Transaction ID : SA11AI.105453
 Amount of Each Receipt this Period
 50.00

B. MS BETTY FEUTZ 640
 Full Name (Last, First, Middle Initial)
 Mailing Address 601 HUNTINGTON DR
 City GREENWOOD State MO Zip Code 64034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 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
 12 / 05 / 2013
Transaction ID : SA11AI.105485
 Amount of Each Receipt this Period
 25.00

C. MS HARRIET M FIELDS 337
 Full Name (Last, First, Middle Initial)
 Mailing Address 830 N SHORE DR NE
 APT 415
 City ST PETERSBURG State FL Zip Code 33701
 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 ▼ 445.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 03 / 2013
Transaction ID : SA11AI.105518
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
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 196 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS HARRIET M FIELDS 337		Date of Receipt
Mailing Address 830 N SHORE DR NE APT 415		<input type="text" value="09"/> / <input type="text" value="16"/> / <input type="text" value="2013"/>
City ST PETERSBURG State FL Zip Code 33701		Transaction ID : SA11Al.105519
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer NONE Occupation RETIRED		<input type="text" value="75.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="520.00"/>	

Full Name (Last, First, Middle Initial) B. MS HARRIET M FIELDS 337		Date of Receipt
Mailing Address 830 N SHORE DR NE APT 415		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2013"/>
City ST PETERSBURG State FL Zip Code 33701		Transaction ID : SA11Al.105517
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer NONE Occupation RETIRED		<input type="text" value="100.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="620.00"/>	

Full Name (Last, First, Middle Initial) C. MS HARRIET M FIELDS 337		Date of Receipt
Mailing Address 830 N SHORE DR NE APT 415		<input type="text" value="12"/> / <input type="text" value="16"/> / <input type="text" value="2013"/>
City ST PETERSBURG State FL Zip Code 33701		Transaction ID : SA11Al.105516
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer NONE Occupation RETIRED		<input type="text" value="75.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="695.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="250.00"/>
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 197 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR CURNEY E FIELDS 452
 Full Name (Last, First, Middle Initial)
 Mailing Address 4461 KUGLER MILL RD
 City CINCINNATI State OH Zip Code 45236
 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
 11 / 19 / 2013
Transaction ID : SA11AI.105522
 Amount of Each Receipt this Period
 50.00

B. MR H DUSTIN FILLMORE 761
 Full Name (Last, First, Middle Initial)
 Mailing Address 2712 MANORWOOD TRL
 City FORT WORTH State TX Zip Code 76109
 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 / 19 / 2013
Transaction ID : SA11AI.105566
 Amount of Each Receipt this Period
 100.00

C. MR H DUSTIN FILLMORE 761
 Full Name (Last, First, Middle Initial)
 Mailing Address 2712 MANORWOOD TRL
 City FORT WORTH State TX Zip Code 76109
 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 / 23 / 2013
Transaction ID : SA11AI.105565
 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: PAGE 198 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS CHRISTINE L FINAMORE 087
 Full Name (Last, First, Middle Initial)
 Mailing Address 11 BEAVER HOLLOW DR
 City BRICK State NJ Zip Code 08724
 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
 12 / 09 / 2013
Transaction ID : SA11Al.105570
 Amount of Each Receipt this Period
 25.00

B. MS CHRISTINE L FINAMORE 087
 Full Name (Last, First, Middle Initial)
 Mailing Address 11 BEAVER HOLLOW DR
 City BRICK State NJ Zip Code 08724
 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
 12 / 11 / 2013
Transaction ID : SA11Al.105569
 Amount of Each Receipt this Period
 100.00

C. MR RAYMOND N 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 ▼ 505.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2013
Transaction ID : SA11Al.105596
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
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 199 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR RAYMOND N FINK 488		Date of Receipt
Mailing Address PO BOX 134		<input type="text" value="08"/> / <input type="text" value="21"/> / <input type="text" value="2013"/>
City	State	Zip Code
WILLIAMSTON	MI	48895
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.105597
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="555.00"/>	

Full Name (Last, First, Middle Initial) B. MR RAYMOND N FINK 488		Date of Receipt
Mailing Address PO BOX 134		<input type="text" value="10"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>
City	State	Zip Code
WILLIAMSTON	MI	48895
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.105598
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="655.00"/>	

Full Name (Last, First, Middle Initial) C. MR RAYMOND N FINK 488		Date of Receipt
Mailing Address PO BOX 134		<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2013"/>
City	State	Zip Code
WILLIAMSTON	MI	48895
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.105600
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="50.00"/>
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"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="200.00"/>
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 200 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR RAYMOND N 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 ▼ 855.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2013
Transaction ID : SA11AI.105599
 Amount of Each Receipt this Period
 150.00

B. MS HELENA S FISCHER 452
 Full Name (Last, First, Middle Initial)
 Mailing Address 18 FAR HILLS DR
 City CINCINNATI State OH Zip Code 45208
 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
 10 / 08 / 2013
Transaction ID : SA11AI.105639
 Amount of Each Receipt this Period
 25.00

C. MR ROBERT FISHER 327
 Full Name (Last, First, Middle Initial)
 Mailing Address 727 S FLORIDA AVE
 City DELAND State FL Zip Code 32720
 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
 08 / 19 / 2013
Transaction ID : SA11AI.105679
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional).....▶	375.00
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 201 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR ROBERT FISHER 327
 Full Name (Last, First, Middle Initial)
 Mailing Address 727 S FLORIDA AVE
 City DELAND State FL Zip Code 32720
 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 / 06 / 2013
Transaction ID : SA11AI.105680
 Amount of Each Receipt this Period
 100.00

B. MR ALBERT B FISHER 432
 Full Name (Last, First, Middle Initial)
 Mailing Address 5634 CONCORD HILL DR
 City COLUMBUS State OH Zip Code 43213
 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 / 16 / 2013
Transaction ID : SA11AI.105685
 Amount of Each Receipt this Period
 100.00

C. MR ALBERT B FISHER 432
 Full Name (Last, First, Middle Initial)
 Mailing Address 5634 CONCORD HILL DR
 City COLUMBUS State OH Zip Code 43213
 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
 10 / 08 / 2013
Transaction ID : SA11AI.105686
 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 202 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR JOHN J FITCH 475
 Full Name (Last, First, Middle Initial)
 Mailing Address 661 W GRAHAM RD
 City WASHINGTON State IN Zip Code 47501
 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 / 03 / 2013
Transaction ID : SA11Al.105763
 Amount of Each Receipt this Period
 150.00

B. MR JOHN J FITCH 475
 Full Name (Last, First, Middle Initial)
 Mailing Address 661 W GRAHAM RD
 City WASHINGTON State IN Zip Code 47501
 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 / 13 / 2013
Transaction ID : SA11Al.105764
 Amount of Each Receipt this Period
 200.00

C. MR JOHN J FITCH 475
 Full Name (Last, First, Middle Initial)
 Mailing Address 661 W GRAHAM RD
 City WASHINGTON State IN Zip Code 47501
 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
 10 / 02 / 2013
Transaction ID : SA11Al.105761
 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: (check only one)	PAGE 203 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR JOHN J FITCH 475
 Full Name (Last, First, Middle Initial)
 Mailing Address 661 W GRAHAM RD
 City WASHINGTON State IN Zip Code 47501
 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
 11 / 20 / 2013
Transaction ID : SA11AI.105760
 Amount of Each Receipt this Period
 50.00

B. MRS JEAN W FITZGERALD 122
 Full Name (Last, First, Middle Initial)
 Mailing Address 18 VER PLANCK ST
 City ALBANY State NY Zip Code 12206
 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 ▼ 295.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2013
Transaction ID : SA11AI.105780
 Amount of Each Receipt this Period
 75.00

C. MRS JEAN W FITZGERALD 122
 Full Name (Last, First, Middle Initial)
 Mailing Address 18 VER PLANCK ST
 City ALBANY State NY Zip Code 12206
 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 ▼ 345.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2013
Transaction ID : SA11AI.105781
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
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 204 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS SUSAN M FITZHUGH 890
 Full Name (Last, First, Middle Initial)
 Mailing Address 3169 DEGAS TAPESTRY AVE
 City Henderson State NV Zip Code 89044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 06 / 2013
Transaction ID : SA11AI.105801
 Amount of Each Receipt this Period 100.00

B. MS SUSAN M FITZHUGH 890
 Full Name (Last, First, Middle Initial)
 Mailing Address 3169 DEGAS TAPESTRY AVE
 City Henderson State NV Zip Code 89044
 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 ▼ 400.00

Date of Receipt 12 / 04 / 2013
Transaction ID : SA11AI.105800
 Amount of Each Receipt this Period 100.00

C. MR FRED FITZULA 109
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 S MAIN ST
 City HARRIMAN State NY Zip Code 10926
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MONROE JEWELERS Occupation JEWELER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 13 / 2013
Transaction ID : SA11AI.105815
 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 205 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR JOHN FLANAGAN 296		Date of Receipt
Mailing Address 2 FOUNTAINVIEW TER APT 402		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Zip Code
GREENVILLE	SC	29607
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.105837
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="150.00"/>
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 TOM FLANAGAN 706		Date of Receipt
Mailing Address 12 FAIRWAY DR		<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City	State	Zip Code
LAKE CHARLES	LA	70605
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.105841
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	NOT EMPLOYED	<input type="text" value="175.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="275.00"/>	

Full Name (Last, First, Middle Initial) C. MS LINDA C FLETCHER 647		Date of Receipt
Mailing Address 1046 NE 40TH RD		<input type="text" value="12"/> / <input type="text" value="16"/> / <input type="text" value="2013"/>
City	State	Zip Code
LAMAR	MO	64759
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.105895
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="205.00"/>	

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: (check only one)	PAGE 206 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS JOANNE P FLOYD 312
 Full Name (Last, First, Middle Initial)
 Mailing Address 2900 INGLESIDE AVE
 City MACON State GA Zip Code 31204
 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 ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2013
Transaction ID : SA11AI.105943
 Amount of Each Receipt this Period
 250.00

B. MS MARY FLOYD 759
 Full Name (Last, First, Middle Initial)
 Mailing Address 1121 MOCKINGBIRD LN
 City NACOGDOCHES State TX Zip Code 75964
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation REALTOR
 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 / 22 / 2013
Transaction ID : SA11AI.105944
 Amount of Each Receipt this Period
 100.00

C. MR JOHN FLOYD 959
 Full Name (Last, First, Middle Initial)
 Mailing Address 21 LEMON HILL DR
 City OROVILLE State CA Zip Code 95966
 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
 10 / 14 / 2013
Transaction ID : SA11AI.105948
 Amount of Each Receipt this Period
 100.00

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: PAGE 207 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR JOHN FLOYD 959
 Full Name (Last, First, Middle Initial)
 Mailing Address 21 LEMON HILL DR
 City OROVILLE State CA Zip Code 95966
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 03 / 2013
Transaction ID : SA11AI.105949
 Amount of Each Receipt this Period
 200.00

B. MR DANIEL C FOLLIS 462
 Full Name (Last, First, Middle Initial)
 Mailing Address 133 W MARKET ST # 205
 City INDIANAPOLIS State IN Zip Code 46204
 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 ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 25 / 2013
Transaction ID : SA11AI.106012
 Amount of Each Receipt this Period
 100.00

C. MS HAZEL FOLSOM 300
 Full Name (Last, First, Middle Initial)
 Mailing Address 6047 GRAND FOREST CT
 City NORCROSS State GA Zip Code 30092
 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 / D D / Y Y Y Y Y Y
 10 / 17 / 2013
Transaction ID : SA11AI.106017
 Amount of Each Receipt this Period
 250.00

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 208 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR RICHARD FORSYTHE 320
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 3555
 City State Zip Code
 PONTE VEDRA BEACH FL 32004
 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 / 28 / 2013
Transaction ID : SA11AI.106142
 Amount of Each Receipt this Period
 100.00

B. MR ROBERT E FOSTER 127
 Full Name (Last, First, Middle Initial)
 Mailing Address 15 CATHERINE ST
 City State Zip Code
 PORT JERVIS NY 12771
 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 / 15 / 2013
Transaction ID : SA11AI.106173
 Amount of Each Receipt this Period
 50.00

C. MR ROBERT E FOSTER 127
 Full Name (Last, First, Middle Initial)
 Mailing Address 15 CATHERINE ST
 City State Zip Code
 PORT JERVIS NY 12771
 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 / 27 / 2013
Transaction ID : SA11AI.106174
 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: (check only one)	PAGE 209 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MRS THETYS DIANA FOSTER 208
 Full Name (Last, First, Middle Initial)
 Mailing Address 2 SOTWEED CT
 City POTOMAC State MD Zip Code 20854
 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
 11 / 18 / 2013
Transaction ID : SA11AI.106180
 Amount of Each Receipt this Period
 200.00

B. MRS THETYS DIANA FOSTER 208
 Full Name (Last, First, Middle Initial)
 Mailing Address 2 SOTWEED CT
 City POTOMAC State MD Zip Code 20854
 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
 11 / 20 / 2013
Transaction ID : SA11AI.106178
 Amount of Each Receipt this Period
 200.00

C. MS LINDA R FOSTER 488
 Full Name (Last, First, Middle Initial)
 Mailing Address 3185 W GARRISON RD
 City OWOSSO State MI Zip Code 48867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2013
Transaction ID : SA11AI.106193
 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 210 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS LINDA R FOSTER 488
 Full Name (Last, First, Middle Initial)
 Mailing Address 3185 W GARRISON RD
 City OWOSSO State MI Zip Code 48867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 14 / 2013
Transaction ID : SA11AI.106194
 Amount of Each Receipt this Period
 50.00

B. MS LINDA R FOSTER 488
 Full Name (Last, First, Middle Initial)
 Mailing Address 3185 W GARRISON RD
 City OWOSSO State MI Zip Code 48867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2013
Transaction ID : SA11AI.106192
 Amount of Each Receipt this Period
 25.00

C. MR CHESTER FOSTER 754 JR
 Full Name (Last, First, Middle Initial)
 Mailing Address 4212 COUNTY ROAD 2700
 City TELEPHONE State TX Zip Code 75488
 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 10 / 2013
Transaction ID : SA11AI.106199
 Amount of Each Receipt this Period
 400.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 475.00
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 211 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS SANDRA P FOSTER 760
 Full Name (Last, First, Middle Initial)
 Mailing Address 2712 CREEKWOOD DR
 City GRAPEVINE State TX Zip Code 76051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 22 / 2013
Transaction ID : SA11AI.106201
 Amount of Each Receipt this Period
 300.00

B. MR REGINALD M FOUNTAIN 278
 Full Name (Last, First, Middle Initial)
 Mailing Address 204 EASTBROOK DR
 City GREENVILLE State NC Zip Code 27858
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 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 / 2013
Transaction ID : SA11AI.106223
 Amount of Each Receipt this Period
 200.00

C. WILNOREE L FOWLER 988
 Full Name (Last, First, Middle Initial)
 Mailing Address 15661 STATE ROUTE 28 W
 City QUINCY State WA Zip Code 98848
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 16 / 2013
Transaction ID : SA11AI.106255
 Amount of Each Receipt this Period
 100.00

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 212 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. WILNOREE L FOWLER 988
 Full Name (Last, First, Middle Initial)
 Mailing Address 15661 STATE ROUTE 28 W
 City QUINCY State WA Zip Code 98848
 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
 12 / 16 / 2013
Transaction ID : SA11AI.106254
 Amount of Each Receipt this Period
 100.00

B. DR MICHAEL FOX 322 MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 7051 SOUTHPOINT PARKWAY
 City JACKSONVILLE State FL Zip Code 32216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CTR FOR REPRODUCTIVE MEDICINE 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
 12 / 23 / 2013
Transaction ID : SA11AI.106265
 Amount of Each Receipt this Period
 150.00

C. MS ELEANOR J FOX 339
 Full Name (Last, First, Middle Initial)
 Mailing Address 13572 PINE VILLA LN
 City FORT MYERS State FL Zip Code 33912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 12 / 2013
Transaction ID : SA11AI.106269
 Amount of Each Receipt this Period
 100.00

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: PAGE 213 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS ELEANOR S FOX 339
 Full Name (Last, First, Middle Initial)
 Mailing Address 13572 PINE VILLA LN
 City State Zip Code
 FORT MYERS FL 33912
 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
 07 / 03 / 2013
Transaction ID : SA11AI.106267
 Amount of Each Receipt this Period
 500.00

B. MS ELEANOR S FOX 339
 Full Name (Last, First, Middle Initial)
 Mailing Address 13572 PINE VILLA LN
 City State Zip Code
 FORT MYERS FL 33912
 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 ▼
 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2013
Transaction ID : SA11AI.106268
 Amount of Each Receipt this Period
 300.00

C. MS ELLEN A FOX 936
 Full Name (Last, First, Middle Initial)
 Mailing Address 9700 E BARSTOW AVE
 City State Zip Code
 CLOVIS CA 93619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE HOMEMAKER
 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 / 08 / 2013
Transaction ID : SA11AI.106296
 Amount of Each Receipt this Period
 100.00

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 214 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS ELLEN A FOX 936		Date of Receipt
Mailing Address 9700 E BARSTOW AVE		<input type="text" value="10"/> / <input type="text" value="08"/> / <input type="text" value="2013"/>
City	State	Zip Code
CLOVIS	CA	93619
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.106297
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	HOMEMAKER	<input type="text" value="100.00"/>
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) B. MS RUTH FOX 945		Date of Receipt
Mailing Address 2520 ARLINGTON BLVD		<input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2013"/>
City	State	Zip Code
EL CERRITO	CA	94530
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.106303
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="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MS RUTH E FOX 945		Date of Receipt
Mailing Address 2520 ARLINGTON BLVD		<input type="text" value="07"/> / <input type="text" value="05"/> / <input type="text" value="2013"/>
City	State	Zip Code
EL CERRITO	CA	94530
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.106298
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="35.00"/>
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) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="235.00"/>
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 215 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS RUTH E FOX 945
 Full Name (Last, First, Middle Initial)
 Mailing Address 2520 ARLINGTON BLVD
 City State Zip Code
 EL CERRITO CA 94530
 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
 10 / 03 / 2013
Transaction ID : SA11AI.106302
 Amount of Each Receipt this Period
 35.00

B. MS FAYE FOXWORTH 775
 Full Name (Last, First, Middle Initial)
 Mailing Address 3132 FERRY RD
 City State Zip Code
 BAYTOWN TX 77520
 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
 12 / 16 / 2013
Transaction ID : SA11AI.106312
 Amount of Each Receipt this Period
 75.00

C. MR WILLIAM A FRACK 330
 Full Name (Last, First, Middle Initial)
 Mailing Address 24 DOCKSIDE LN
 City State Zip Code
 KEY LARGO FL 33037
 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 ▼
 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2013
Transaction ID : SA11AI.106320
 Amount of Each Receipt this Period
 175.00

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 216 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR RONALD D FRANCIS 561
 Full Name (Last, First, Middle Initial)
 Mailing Address 974 161ST ST
 City PIPSTONE State MN Zip Code 56164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation FARMER
 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
 11 / 26 / 2013
Transaction ID : SA11AI.106362
 Amount of Each Receipt this Period
 100.00

B. TREBIE P FRANCISCO 770
 Full Name (Last, First, Middle Initial)
 Mailing Address 2210 AVALON PL
 City HOUSTON State TX Zip Code 77019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LIVING DESIGNS OF HOUSTON Occupation INTERIOR DESIGNER
 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 / 01 / 2013
Transaction ID : SA11AI.106371
 Amount of Each Receipt this Period
 100.00

C. MR PETER A FRANTZ 070
 Full Name (Last, First, Middle Initial)
 Mailing Address 333 RIVER ST
 APT 926
 City HOBOKEN State NJ Zip Code 07030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation ARTIST
 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 / 27 / 2013
Transaction ID : SA11AI.106419
 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 217 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR PETER A FRANTZ 070		Date of Receipt
Mailing Address 333 RIVER ST APT 926		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City HOBOKEN State NJ Zip Code 07030		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2013"/>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11Al.106420
Name of Employer SELF EMPLOYED Occupation ARTIST		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="100.00"/>
Aggregate Year-to-Date ▼		
<input type="text" value="400.00"/>		

Full Name (Last, First, Middle Initial) B. MR THOMAS F FRAPPIER 468		Date of Receipt
Mailing Address 10723 SUMMERHILL PL		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City FORT WAYNE State IN Zip Code 46814		<input type="text" value="12"/> / <input type="text" value="13"/> / <input type="text" value="2013"/>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11Al.106435
Name of Employer NONE Occupation RETIRED		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="175.00"/>
Aggregate Year-to-Date ▼		
<input type="text" value="325.00"/>		

Full Name (Last, First, Middle Initial) C. MR THOMAS F FRAPPIER 468		Date of Receipt
Mailing Address 10723 SUMMERHILL PL		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City FORT WAYNE State IN Zip Code 46814		<input type="text" value="12"/> / <input type="text" value="27"/> / <input type="text" value="2013"/>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11Al.106436
Name of Employer NONE Occupation RETIRED		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="50.00"/>
Aggregate Year-to-Date ▼		
<input type="text" value="375.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="325.00"/>
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 218 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR PETE FRAZIER 675		Date of Receipt
Mailing Address 1968 Q RD		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City LARNED State KS Zip Code 67550		Transaction ID : SA11AI.106466
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer PETE FRAZIER Occupation SELF EMPLOYED		<input type="text" value="10"/> / <input type="text" value="21"/> / <input type="text" value="2013"/> <input type="text" value="100.00"/>
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"/>	

Full Name (Last, First, Middle Initial) B. MR PETE FRAZIER 675		Date of Receipt
Mailing Address 1968 Q RD		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City LARNED State KS Zip Code 67550		Transaction ID : SA11AI.106467
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer PETE FRAZIER Occupation SELF EMPLOYED		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2013"/> <input type="text" value="150.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="450.00"/>	

Full Name (Last, First, Middle Initial) C. MR GARY D FREDETTE 765		Date of Receipt
Mailing Address 4400 RAINLILY ST		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City KILLEEN State TX Zip Code 76542		Transaction ID : SA11AI.106493
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer NONE Occupation RETIRED		<input type="text" value="08"/> / <input type="text" value="19"/> / <input type="text" value="2013"/> <input type="text" value="150.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

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=""/>

**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 219 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR GARY D FREDETTE 765
 Full Name (Last, First, Middle Initial)
 Mailing Address 4400 RAINLILY ST
 City KILLEEN State TX Zip Code 76542
 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
 10 / 07 / 2013
Transaction ID : SA11AI.106491
 Amount of Each Receipt this Period
 100.00

B. MR GARY D FREDETTE 765
 Full Name (Last, First, Middle Initial)
 Mailing Address 4400 RAINLILY ST
 City KILLEEN State TX Zip Code 76542
 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
 11 / 20 / 2013
Transaction ID : SA11AI.106492
 Amount of Each Receipt this Period
 100.00

C. MR ROBERT P FREEMAN 329
 Full Name (Last, First, Middle Initial)
 Mailing Address 5015 FAIRWAYS CIR APT 207
 City VERO BEACH State FL Zip Code 32967
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2013
Transaction ID : SA11AI.106523
 Amount of Each Receipt this Period
 150.00

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 220 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR TIM M FREUDENBERGER 926
 Full Name (Last, First, Middle Initial)
 Mailing Address 31022 OLD SAN JUAN RD
 City SAN JUAN CAPO State CA Zip Code 92675
 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 **300.00**

Date of Receipt **12 / 11 / 2013**
Transaction ID : SA11Al.106566
 Amount of Each Receipt this Period **300.00**

B. MR HENRY W FREW 178
 Full Name (Last, First, Middle Initial)
 Mailing Address 35 VALLEY VIEW RD
 City DANVILLE State PA Zip Code 17821
 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 **09 / 19 / 2013**
Transaction ID : SA11Al.106568
 Amount of Each Receipt this Period **50.00**

C. MS EUNICE E FRISKE 601
 Full Name (Last, First, Middle Initial)
 Mailing Address 2310 S 11TH AVE
 City BROADVIEW State IL Zip Code 60155
 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 / 20 / 2013**
Transaction ID : SA11Al.106610
 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 221 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS EUNICE E FRISKE 601
 Full Name (Last, First, Middle Initial)
 Mailing Address 2310 S 11TH AVE
 City BROADVIEW State IL Zip Code 60155
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 20 / 2013
Transaction ID : SA11Al.106611
 Amount of Each Receipt this Period
 50.00

B. MS CARLA R FROEHLICH 925
 Full Name (Last, First, Middle Initial)
 Mailing Address 44790 CUPA LN
 City TEMECULA State CA Zip Code 92592
 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
 11 / 25 / 2013
Transaction ID : SA11Al.106631
 Amount of Each Receipt this Period
 100.00

C. MR CHARLES W FROST 341
 Full Name (Last, First, Middle Initial)
 Mailing Address 176 S COLLIER BLVD UNIT 405
 City MARCO ISLAND State FL Zip Code 34145
 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
 10 / 08 / 2013
Transaction ID : SA11Al.106653
 Amount of Each Receipt this Period
 150.00

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 222 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS CONSTANCE J FRUEH 502
 Full Name (Last, First, Middle Initial)
 Mailing Address 205 E 9TH ST
 City PELLA State IA Zip Code 50219
 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
 11 / 15 / 2013
Transaction ID : SA11AI.106662
 Amount of Each Receipt this Period
 25.00

B. MR ARTHUR M FRYER 152
 Full Name (Last, First, Middle Initial)
 Mailing Address 2117 E CARSON ST APT B3
 City PITTSBURGH State PA Zip Code 15203
 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
 10 / 14 / 2013
Transaction ID : SA11AI.106685
 Amount of Each Receipt this Period
 25.00

C. MS DIANNE FULLARTON 068
 Full Name (Last, First, Middle Initial)
 Mailing Address 28 GIDEON LN
 City DARIEN State CT Zip Code 06820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 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
 12 / 02 / 2013
Transaction ID : SA11AI.106710
 Amount of Each Receipt this Period
 500.00

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 223 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS LUCILLE E FULLER 168
 Full Name (Last, First, Middle Initial)
 Mailing Address 432 LOWER GEORGES VALLEY RD
 City State Zip Code
 SPRING MILLS PA 16875
 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 / 16 / 2013
Transaction ID : SA11Al.106713
 Amount of Each Receipt this Period
 100.00

B. MS LUCILLE E FULLER 168
 Full Name (Last, First, Middle Initial)
 Mailing Address 432 LOWER GEORGES VALLEY RD
 City State Zip Code
 SPRING MILLS PA 16875
 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 ▼
 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 05 / 2013
Transaction ID : SA11Al.106712
 Amount of Each Receipt this Period
 100.00

C. MS LUCILLE E FULLER 168
 Full Name (Last, First, Middle Initial)
 Mailing Address 432 LOWER GEORGES VALLEY RD
 City State Zip Code
 SPRING MILLS PA 16875
 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 ▼
 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 10 / 2013
Transaction ID : SA11Al.106711
 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 224 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR EDWARD GABRIEL 275
 Full Name (Last, First, Middle Initial)
 Mailing Address 1322 LAKE ROYALE
 City LOUISBURG State NC Zip Code 27549
 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
 10 / 21 / 2013
Transaction ID : SA11Al.106810
 Amount of Each Receipt this Period
 100.00

B. MR JOE G GAMBINO 121
 Full Name (Last, First, Middle Initial)
 Mailing Address 44 MALIBU HL
 City RENSSELAER State NY Zip Code 12144
 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
 11 / 15 / 2013
Transaction ID : SA11Al.106951
 Amount of Each Receipt this Period
 25.00

C. MS VICKI GARCIA 337
 Full Name (Last, First, Middle Initial)
 Mailing Address 1675 FARRIER TRL
 City CLEARWATER State FL Zip Code 33765
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MUSICIAN Occupation SELF EMPLOYED
 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 / 09 / 2013
Transaction ID : SA11Al.107015
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	175.00
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 225 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR GLENN M GARDNER 700
 Full Name (Last, First, Middle Initial)
 Mailing Address 3332 N WOODLAWN AVE
 City METAIRIE State LA Zip Code 70006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 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
 12 / 02 / 2013
Transaction ID : SA11AI.107051
 Amount of Each Receipt this Period
 125.00

B. MR WILLIAM C GARDNER 998
 Full Name (Last, First, Middle Initial)
 Mailing Address 5880 N DOUGLAS HWY
 City JUNEAU State AK Zip Code 99801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BARTLETT REGIONAL HOSPITAL Occupation CHIEF NURSING OFFICER
 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 / 29 / 2013
Transaction ID : SA11AI.107069
 Amount of Each Receipt this Period
 150.00

C. MR WILLIAM C GARDNER 998
 Full Name (Last, First, Middle Initial)
 Mailing Address 5880 N DOUGLAS HWY
 City JUNEAU State AK Zip Code 99801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BARTLETT REGIONAL HOSPITAL Occupation CHIEF NURSING OFFICER
 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
 10 / 29 / 2013
Transaction ID : SA11AI.107068
 Amount of Each Receipt this Period
 150.00

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 226 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS DRUCILLA M GATLIN 393
 Full Name (Last, First, Middle Initial)
 Mailing Address 23 TALMADGE GATLIN DR
 City WAYNESBORO State MS Zip Code 39367
 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 / 19 / 2013
Transaction ID : SA11AI.107235
 Amount of Each Receipt this Period
 225.00

B. MR WILLIAM D GAVER 038
 Full Name (Last, First, Middle Initial)
 Mailing Address 102 GOVERNORS RD
 City BROOKFIELD State NH Zip Code 03872
 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 / 11 / 2013
Transaction ID : SA11AI.107260
 Amount of Each Receipt this Period
 100.00

C. MR NORMAN W GAVIN 064
 Full Name (Last, First, Middle Initial)
 Mailing Address 173 CHURCH ST
 City WALLINGFORD State CT Zip Code 06492
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UNITED CONCRETE PRODUCTS INC Occupation MANAGER
 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 / 27 / 2013
Transaction ID : SA11AI.107262
 Amount of Each Receipt this Period
 100.00

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 227 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR NORMAN W GAVIN 064
 Full Name (Last, First, Middle Initial)
 Mailing Address 173 CHURCH ST
 City WALLINGFORD State CT Zip Code 06492
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UNITED CONCRETE PRODUCTS INC Occupation MANAGER
 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
 11 / 27 / 2013
Transaction ID : SA11AI.107263
 Amount of Each Receipt this Period
 100.00

B. MS BETTY L GEGG 636
 Full Name (Last, First, Middle Initial)
 Mailing Address 12914 JOGGERST RD
 City STE GENEVIEVE State MO Zip Code 63670
 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
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2013
Transaction ID : SA11AI.107322
 Amount of Each Receipt this Period
 50.00

C. MS BETTY L GEGG 636
 Full Name (Last, First, Middle Initial)
 Mailing Address 12914 JOGGERST RD
 City STE GENEVIEVE State MO Zip Code 63670
 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
 11 / 20 / 2013
Transaction ID : SA11AI.107321
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 170.00
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 228 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR MARK GELDER 194
 Full Name (Last, First, Middle Initial)
 Mailing Address 200 RIVERCREST DR
 City PHOENIXVILLE State PA Zip Code 19460
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BAYER HEALTHCARE Occupation HEALTH CARE PROVIDER
 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
 11 / 19 / 2013
Transaction ID : SA11AI.107365
 Amount of Each Receipt this Period
 100.00

B. MR WARREN M GEORGE 048
 Full Name (Last, First, Middle Initial)
 Mailing Address 33 JAMESON POINT RD
 City ROCKLAND State ME Zip Code 04841
 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 ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2013
Transaction ID : SA11AI.107401
 Amount of Each Receipt this Period
 50.00

C. MS EVELYN J GERHART 650
 Full Name (Last, First, Middle Initial)
 Mailing Address 400 W RUSSELL ST
 City CALIFORNIA State MO Zip Code 65018
 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 / 06 / 2013
Transaction ID : SA11AI.107467
 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: (check only one)	PAGE 229 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS EVELYN J GERHART 650
 Full Name (Last, First, Middle Initial)
 Mailing Address 400 W RUSSELL ST
 City CALIFORNIA State MO Zip Code 65018
 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
 12 / 06 / 2013
Transaction ID : SA11Al.107465
 Amount of Each Receipt this Period
 50.00

B. MS EVELYN J GERHART 650
 Full Name (Last, First, Middle Initial)
 Mailing Address 400 W RUSSELL ST
 City CALIFORNIA State MO Zip Code 65018
 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
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2013
Transaction ID : SA11Al.107464
 Amount of Each Receipt this Period
 50.00

C. MS SONJA GERQUEST 064
 Full Name (Last, First, Middle Initial)
 Mailing Address 5101 ASHLAR VLG
 City WALLINGFORD State CT Zip Code 06492
 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
 09 / 16 / 2013
Transaction ID : SA11Al.107494
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	125.00
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 230 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS SONJA GERQUEST 064
 Full Name (Last, First, Middle Initial)
 Mailing Address 5101 ASHLAR VLG
 City WALLINGFORD State CT Zip Code 06492
 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 ▼ 475.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 27 / 2013
Transaction ID : SA11Al.107493
 Amount of Each Receipt this Period
 50.00

B. MS SONJA GERQUEST 064
 Full Name (Last, First, Middle Initial)
 Mailing Address 5101 ASHLAR VLG
 City WALLINGFORD State CT Zip Code 06492
 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 ▼ 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 27 / 2013
Transaction ID : SA11Al.107492
 Amount of Each Receipt this Period
 50.00

C. MRS EILEEN L GETTY 080
 Full Name (Last, First, Middle Initial)
 Mailing Address 148 MERCER PL
 City WILLIAMSTOWN State NJ Zip Code 08094
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 27 / 2013
Transaction ID : SA11Al.107532
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 130.00
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 231 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR STEVE A GIBBS 114		Date of Receipt
Mailing Address 16035 121ST AVE		<input type="text" value="12"/> / <input type="text" value="16"/> / <input type="text" value="2013"/>
City	State	Zip Code
JAMAICA	NY	11434
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.107579
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	UNEMPLOYED	<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="400.00"/>	

Full Name (Last, First, Middle Initial) B. MS GLADYS GIBSON 245		Date of Receipt
Mailing Address 191 OLD WRIGHT SHOP RD		<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2013"/>
City	State	Zip Code
MADISON HEIGHTS	VA	24572
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.107598
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="205.00"/>	

Full Name (Last, First, Middle Initial) C. MR JACK C GIBSON 444		Date of Receipt
Mailing Address 2567 NILES VIENNA RD APT 137		<input type="text" value="07"/> / <input type="text" value="05"/> / <input type="text" value="2013"/>
City	State	Zip Code
NILES	OH	44446
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.107615
Name of Employer	Occupation	Amount of Each Receipt this Period
JACK GIBSON CONSTRUCTION CO	CHAIRMAN	<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="225.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="375.00"/>
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 232 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR RICHARD M GILFILLAN 671
 Full Name (Last, First, Middle Initial)
 Mailing Address 723 S FAIR ST
 City Wellington State KS Zip Code 67152
 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
 10 / 29 / 2013
Transaction ID : SA11Al.107736
 Amount of Each Receipt this Period
 100.00

B. EOIN B GILLER 120
 Full Name (Last, First, Middle Initial)
 Mailing Address 30 MOHAWK TRL
 City CLIFTON PARK State NY Zip Code 12065
 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
 10 / 21 / 2013
Transaction ID : SA11Al.107764
 Amount of Each Receipt this Period
 100.00

C. MS SYLVIA L GILLESPIE 296
 Full Name (Last, First, Middle Initial)
 Mailing Address 721 KNOLLWOOD DR
 City GREENVILLE State SC Zip Code 29607
 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 ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 08 / 2013
Transaction ID : SA11Al.107770
 Amount of Each Receipt this Period
 175.00

SUBTOTAL of Receipts This Page (optional).....▶	375.00
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 233 OF 724
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS SYLVIA L GILLESPIE 296		Date of Receipt
Mailing Address 721 KNOLLWOOD DR		M M M / D D D / Y Y Y Y Y Y 12 / 06 / 2013
City	State	Zip Code
GREENVILLE	SC	29607
FEC ID number of contributing federal political committee.	C	Transaction ID : SA11Al.107771
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	HOMEMAKER	225.00
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	500.00	

Full Name (Last, First, Middle Initial) B. MS MARY E GILLUM 762		Date of Receipt
Mailing Address 112 HERITAGE LN		M M M / D D D / Y Y Y Y Y Y 07 / 02 / 2013
City	State	Zip Code
DENTON	TX	76209
FEC ID number of contributing federal political committee.	C	Transaction ID : SA11Al.107822
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	75.00
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	275.00	

Full Name (Last, First, Middle Initial) C. MRS FLORENCE GIMSE 562		Date of Receipt
Mailing Address 619 9TH ST NW		M M M / D D D / Y Y Y Y Y Y 08 / 30 / 2013
City	State	Zip Code
WILLMAR	MN	56201
FEC ID number of contributing federal political committee.	C	Transaction ID : SA11Al.107844
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	50.00
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	300.00	

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 234 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS BARBARA S GLADDEN 292		Date of Receipt
Mailing Address 3731 VERNER ST		<input type="text" value="09"/> / <input type="text" value="04"/> / <input type="text" value="2013"/>
City	State	Zip Code
COLUMBIA	SC	29204
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.107895
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"/>	

Full Name (Last, First, Middle Initial) B. MS BARBARA S GLADDEN 292		Date of Receipt
Mailing Address 3731 VERNER ST		<input type="text" value="12"/> / <input type="text" value="04"/> / <input type="text" value="2013"/>
City	State	Zip Code
COLUMBIA	SC	29204
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.107894
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="400.00"/>	

Full Name (Last, First, Middle Initial) C. MS ROSIE A GOAD 875		Date of Receipt
Mailing Address PO BOX 9111		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2013"/>
City	State	Zip Code
SANTA FE	NM	87504
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.108023
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="235.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="300.00"/>
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 235 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MRS BETTY D GODARD 443

Full Name (Last, First, Middle Initial)
Mailing Address 2637 N REVERE RD

City AKRON	State OH	Zip Code 44333
---------------	-------------	-------------------

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 / 13 / 2013
Transaction ID : SA11AI.108031

Amount of Each Receipt this Period
100.00

B. MRS BETTY D GODARD 443

Full Name (Last, First, Middle Initial)
Mailing Address 2637 N REVERE RD

City AKRON	State OH	Zip Code 44333
---------------	-------------	-------------------

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
 10 / 03 / 2013
Transaction ID : SA11AI.108030

Amount of Each Receipt this Period
100.00

C. MR LIONEL GODDARD 170

Full Name (Last, First, Middle Initial)
Mailing Address 20 N 12TH ST
APT 332

City LEMOYNE	State PA	Zip Code 17043
-----------------	-------------	-------------------

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 ▼
345.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 08 / 2013
Transaction ID : SA11AI.108040

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 236 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR LIONEL GODDARD 170

Full Name (Last, First, Middle Initial)
Mailing Address 20 N 12TH ST
APT 332

City LEMOYNE State PA Zip Code 17043

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 ▼
370.00

Date of Receipt
09 / 20 / 2013
Transaction ID : SA11AI.108035

Amount of Each Receipt this Period
25.00

B. MR LIONEL GODDARD 170

Full Name (Last, First, Middle Initial)
Mailing Address 20 N 12TH ST
APT 332

City LEMOYNE State PA Zip Code 17043

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 ▼
395.00

Date of Receipt
12 / 20 / 2013
Transaction ID : SA11AI.108039

Amount of Each Receipt this Period
25.00

C. MR LIONEL E GODDARD 170

Full Name (Last, First, Middle Initial)
Mailing Address 20 N 12TH ST
APT 332

City LEMOYNE State PA Zip Code 17043

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 / 12 / 2013
Transaction ID : SA11AI.108037

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 100.00

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 237 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MRS CAROL GOING 973
 Full Name (Last, First, Middle Initial)
 Mailing Address 610 VAUGHN LN UNIT 14
 City LEBANON State OR Zip Code 97355
 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
 11 / 04 / 2013
Transaction ID : SA11AI.144591
 Amount of Each Receipt this Period
 50.00

B. MS CORINNE GOLDEN 953
 Full Name (Last, First, Middle Initial)
 Mailing Address 2704 BERWICK CT
 City MODESTO State CA Zip Code 95355
 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 ▼
 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 15 / 2013
Transaction ID : SA11AI.108133
 Amount of Each Receipt this Period
 30.00

C. MS CORINNE GOLDEN 953
 Full Name (Last, First, Middle Initial)
 Mailing Address 2704 BERWICK CT
 City MODESTO State CA Zip Code 95355
 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 ▼
 290.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 15 / 2013
Transaction ID : SA11AI.108131
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.00
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 238 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS CORINNE GOLDEN 953		Date of Receipt
Mailing Address 2704 BERWICK CT		<input type="text" value="11"/> / <input type="text" value="08"/> / <input type="text" value="2013"/>
City	State	Zip Code
MODESTO	CA	95355
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.108132
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="390.00"/>	

Full Name (Last, First, Middle Initial) B. MS LISA D GOLDING 201		Date of Receipt
Mailing Address 37636 WRIGHT FARM DR		<input type="text" value="08"/> / <input type="text" value="27"/> / <input type="text" value="2013"/>
City	State	Zip Code
PURCELLVILLE	VA	20132
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.108146
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	HOMEMAKER	<input type="text" value="50.00"/>
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"/>	

Full Name (Last, First, Middle Initial) C. MS LISA D GOLDING 201		Date of Receipt
Mailing Address 37636 WRIGHT FARM DR		<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2013"/>
City	State	Zip Code
PURCELLVILLE	VA	20132
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.108144
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	HOMEMAKER	<input type="text" value="50.00"/>
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"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="200.00"/>
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 239 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS LISA D GOLDING 201
 Full Name (Last, First, Middle Initial)
 Mailing Address 37636 WRIGHT FARM DR
 City PURCELLVILLE State VA Zip Code 20132
 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 ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2013
Transaction ID : SA11AI.108145
 Amount of Each Receipt this Period
 25.00

B. MS ANNE GOLDSTEIN 210
 Full Name (Last, First, Middle Initial)
 Mailing Address 10200 STAFFORD LN
 City ELLICOTT CITY State MD Zip Code 21042
 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 / 02 / 2013
Transaction ID : SA11AI.108160
 Amount of Each Receipt this Period
 50.00

C. MS ANNE GOLDSTEIN 210
 Full Name (Last, First, Middle Initial)
 Mailing Address 10200 STAFFORD LN
 City ELLICOTT CITY State MD Zip Code 21042
 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
 10 / 31 / 2013
Transaction ID : SA11AI.108159
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	175.00
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 240 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS ANNE GOLDSTEIN 210
 Full Name (Last, First, Middle Initial)
 Mailing Address 10200 STAFFORD LN
 City State Zip Code
 ELLICOTT CITY MD 21042
 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 ▼
 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 10 / 2013
Transaction ID : SA11Al.108158
 Amount of Each Receipt this Period
 100.00

B. MS SUZANNE C GOLDSTICKER 234
 Full Name (Last, First, Middle Initial)
 Mailing Address 211 11TH ST.
 City State Zip Code
 VIRGINIA BEACH VA 23451
 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 / 19 / 2013
Transaction ID : SA11Al.108162
 Amount of Each Receipt this Period
 100.00

C. MR TRINIDAD R GONZALEZ 760
 Full Name (Last, First, Middle Initial)
 Mailing Address 920 CARPENTER ST
 City State Zip Code
 AZLE TX 76020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE HOMEMAKER
 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
 12 / 10 / 2013
Transaction ID : SA11Al.108191
 Amount of Each Receipt this Period
 125.00

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 241 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS LAURICE W GOODRICH 711
 Full Name (Last, First, Middle Initial)
 Mailing Address 614 OAK HILL DR
 City SHREVEPORT State LA Zip Code 71106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 24 / 2013
Transaction ID : SA11AI.108262
 Amount of Each Receipt this Period
 175.00

B. MS RUTH GOODSON 786
 Full Name (Last, First, Middle Initial)
 Mailing Address 2032 COUNTY ROAD 114
 City LLANO State TX Zip Code 78643
 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
 08 / 12 / 2013
Transaction ID : SA11AI.108270
 Amount of Each Receipt this Period
 100.00

C. MS ROSE GORDON 337
 Full Name (Last, First, Middle Initial)
 Mailing Address 12961 119TH ST
 City LARGO State FL Zip Code 33778
 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 / 29 / 2013
Transaction ID : SA11AI.108285
 Amount of Each Receipt this Period
 50.00

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: PAGE 242 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS ROSE GORDON 337
 Full Name (Last, First, Middle Initial)
 Mailing Address 12961 119TH ST
 City LARGO State FL Zip Code 33778
 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
 10 / 29 / 2013
Transaction ID : SA11AI.108286
 Amount of Each Receipt this Period
 50.00

B. MR ANDREW A GORDON 995
 Full Name (Last, First, Middle Initial)
 Mailing Address 104 STEWART ST
 City ANCHORAGE State AK Zip Code 99508
 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
 07 / 03 / 2013
Transaction ID : SA11AI.108299
 Amount of Each Receipt this Period
 150.00

C. Steve Gose 590
 Full Name (Last, First, Middle Initial)
 Mailing Address 8601 Highway 212
 City Roberts State MT Zip Code 59070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation Oil And Gas
 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 / 2013
Transaction ID : SA11AI.144611
 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 243 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS GWEN E GRACE 103
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 COMBS AVE
 City STATEN ISLAND State NY Zip Code 10306
 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
 11 / 27 / 2013
Transaction ID : SA11AI.108426
 Amount of Each Receipt this Period
 150.00

B. MR BERNARD J GRAMLICH 395
 Full Name (Last, First, Middle Initial)
 Mailing Address 11000 STIGLOR HILL RD
 City OCEAN SPRINGS State MS Zip Code 39565
 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
 11 / 18 / 2013
Transaction ID : SA11AI.108517
 Amount of Each Receipt this Period
 50.00

C. MR STEVE C GRANTIER 588
 Full Name (Last, First, Middle Initial)
 Mailing Address 2124 127TH AVE NW
 City WATFORD CITY State ND Zip Code 58854
 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
 10 / 24 / 2013
Transaction ID : SA11AI.108561
 Amount of Each Receipt this Period
 150.00

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: PAGE 244 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. GWENDOYLN GRAPES 103
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 COMBS AVE
 City STATEN ISLAND State NY Zip Code 10306
 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 ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 12 / 2013
Transaction ID : SA11AI.108564
 Amount of Each Receipt this Period
 35.00

B. MR HORACE GRAY 232
 Full Name (Last, First, Middle Initial)
 Mailing Address 5407 PATTERSON AVE STE 200C
 City RICHMOND State VA Zip Code 23226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GRAY HOMES INCORP Occupation OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 27 / 2013
Transaction ID : SA11AI.108622
 Amount of Each Receipt this Period
 300.00

C. MR DONALD GRAY 284
 Full Name (Last, First, Middle Initial)
 Mailing Address 1808 MEWS DR
 City WILMINGTON State NC Zip Code 28405
 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 / 03 / 2013
Transaction ID : SA11AI.108628
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 435.00
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 245 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

A. MR EDWIN T GRAY 720
Full Name (Last, First, Middle Initial)

Mailing Address 1001 MCARTHUR DR

City JACKSONVILLE State AR Zip Code 72076

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

Name of Employer MILITARY Occupation CIVIL SERVANT

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 / 07 / 2013
Transaction ID : SA11Al.108651

Amount of Each Receipt this Period
 100.00

B. MR EDWIN T GRAY 720
Full Name (Last, First, Middle Initial)

Mailing Address 1001 MCARTHUR DR

City JACKSONVILLE State AR Zip Code 72076

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

Name of Employer MILITARY Occupation CIVIL SERVANT

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 / 23 / 2013
Transaction ID : SA11Al.108653

Amount of Each Receipt this Period
 200.00

C. MR EDWIN T GRAY 720
Full Name (Last, First, Middle Initial)

Mailing Address 1001 MCARTHUR DR

City JACKSONVILLE State AR Zip Code 72076

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

Name of Employer MILITARY Occupation CIVIL SERVANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2013
Transaction ID : SA11Al.108652

Amount of Each Receipt this Period
 50.00

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:	PAGE 246 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

A. MR EDWIN T GRAY 720
 Full Name (Last, First, Middle Initial)
 Mailing Address 1001 MCARTHUR DR
 City JACKSONVILLE State AR Zip Code 72076
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MILITARY Occupation CIVIL SERVANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2013
Transaction ID : SA11AI.108650
 Amount of Each Receipt this Period
 200.00

B. MR MARVIN E GRAYDEAL 500
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 327
 City BERWICK State IA Zip Code 50032
 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
 08 / 12 / 2013
Transaction ID : SA11AI.108671
 Amount of Each Receipt this Period
 50.00

C. MR MARVIN E GRAYDEAL 500
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 327
 City BERWICK State IA Zip Code 50032
 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
 09 / 13 / 2013
Transaction ID : SA11AI.108674
 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: (check only one)	PAGE 247 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS DARLA GRAZDAN 770
 Full Name (Last, First, Middle Initial)
 Mailing Address 4265 SAN FELIPE ST
 STE 800
 City HOUSTON State TX Zip Code 77027
 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
 10 / 07 / 2013
Transaction ID : SA11AI.108678
 Amount of Each Receipt this Period
 300.00

B. DR DONALD GREEN 295
 Full Name (Last, First, Middle Initial)
 Mailing Address 1721 N HIGHGROVE CT
 City MYRTLE BEACH State SC Zip Code 29575
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation DOCTOR
 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
 08 / 12 / 2013
Transaction ID : SA11AI.108705
 Amount of Each Receipt this Period
 225.00

C. DR DONALD GREEN 295
 Full Name (Last, First, Middle Initial)
 Mailing Address 1721 N HIGHGROVE CT
 City MYRTLE BEACH State SC Zip Code 29575
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation DOCTOR
 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
 10 / 04 / 2013
Transaction ID : SA11AI.108706
 Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional).....▶	675.00
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 248 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. NOVALEE GREEN 382
 Full Name (Last, First, Middle Initial)
 Mailing Address 1684 W ANTIOCH RD
 City SPRINGVILLE State TN Zip Code 38256
 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
 12 / 13 / 2013
Transaction ID : SA11AI.108723
 Amount of Each Receipt this Period
 150.00

B. R F GREENE 299
 Full Name (Last, First, Middle Initial)
 Mailing Address 2 TEAL LN
 City HILTON HEAD ISLAND State SC Zip Code 29926
 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 ▼
 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 12 / 2013
Transaction ID : SA11AI.108786
 Amount of Each Receipt this Period
 175.00

C. MS NEVA W GREENE 318
 Full Name (Last, First, Middle Initial)
 Mailing Address 2828 GA HIGHWAY 271
 City ELLAVILLE State GA Zip Code 31806
 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 / 2013
Transaction ID : SA11AI.108787
 Amount of Each Receipt this Period
 100.00

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 249 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

A. MR JULIAN R GREENLAND 341
 Full Name (Last, First, Middle Initial)
 Mailing Address 4731 BONITA BAY BLVD UNIT 404
 City State Zip Code
 BONITA SPRINGS FL 34134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF EMPLOYED ADVISOR
 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 / 20 / 2013
Transaction ID : SA11AI.108800
 Amount of Each Receipt this Period
 300.00

B. MS JANICE J GRIFFIN 530
 Full Name (Last, First, Middle Initial)
 Mailing Address 6419 COUNTY ROAD Q
 City State Zip Code
 HARTLAND WI 53029
 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 ▼
 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2013
Transaction ID : SA11AI.108942
 Amount of Each Receipt this Period
 100.00

C. MS ANNETTE GRIGGS 403
 Full Name (Last, First, Middle Initial)
 Mailing Address 2275 COBHILL RD
 City State Zip Code
 IRVINE KY 40336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE HOMEMAKER
 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 / 08 / 2013
Transaction ID : SA11AI.108999
 Amount of Each Receipt this Period
 50.00

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 250 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS ANNETTE GRIGGS 403
 Full Name (Last, First, Middle Initial)
 Mailing Address 2275 COBHILL RD
 City IRVINE State KY Zip Code 40336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 03 / 2013
Transaction ID : SA11AI.109000
 Amount of Each Receipt this Period
 50.00

B. MR PHILLIP GRIM 344
 Full Name (Last, First, Middle Initial)
 Mailing Address 1603 KILLARNEY CT UNIT A
 City OCALA State FL Zip Code 34472
 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
 11 / 13 / 2013
Transaction ID : SA11AI.109020
 Amount of Each Receipt this Period
 25.00

C. MR DONALD L GROVER 471
 Full Name (Last, First, Middle Initial)
 Mailing Address 312 OLIVER ST APT 2
 City CORYDON State IN Zip Code 47112
 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 ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2013
Transaction ID : SA11AI.109177
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	175.00
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 251 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR ARTHUR M GRUBE 617
 Full Name (Last, First, Middle Initial)
 Mailing Address 2624 COUNTY ROAD 1100 N
 City EL PASO State IL Zip Code 61738
 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 ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 22 / 2013
Transaction ID : SA11AI.109202
 Amount of Each Receipt this Period
 100.00

B. MR ARTHUR M GRUBE 617
 Full Name (Last, First, Middle Initial)
 Mailing Address 2624 COUNTY ROAD 1100 N
 City EL PASO State IL Zip Code 61738
 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 ▼ 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2013
Transaction ID : SA11AI.109200
 Amount of Each Receipt this Period
 50.00

C. MS VANESSA GRUBER 301
 Full Name (Last, First, Middle Initial)
 Mailing Address 761 EPHEBUS CHURCH RD
 City WHITESBURG State GA Zip Code 30185
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 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 / 04 / 2013
Transaction ID : SA11AI.109209
 Amount of Each Receipt this Period
 150.00

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 252 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS VANESSA GRUBER 301
 Full Name (Last, First, Middle Initial)
 Mailing Address 761 EPHEBUS CHURCH RD
 City WHITESBURG State GA Zip Code 30185
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 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
 11 / 19 / 2013
Transaction ID : SA11AI.109208
 Amount of Each Receipt this Period
 75.00

B. MS MARCELLA GRUVER 507
 Full Name (Last, First, Middle Initial)
 Mailing Address 206 MOIR ST
 City WATERLOO State IA Zip Code 50701
 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 / 2013
Transaction ID : SA11AI.109228
 Amount of Each Receipt this Period
 25.00

C. MS KATHLEEN GUARIGLIA 068
 Full Name (Last, First, Middle Initial)
 Mailing Address 299 UMPAWAUG RD
 City REDDING State CT Zip Code 06896
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2013
Transaction ID : SA11AI.109233
 Amount of Each Receipt this Period
 175.00

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:	PAGE 253 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

A. MS LEEANN GUESS 782
Full Name (Last, First, Middle Initial)

Mailing Address 115 HONEYSUCKLE LN

City SAN ANTONIO State TX Zip Code 78213

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
 11 / 27 / 2013
Transaction ID : SA11AI.109261

Amount of Each Receipt this Period
 50.00

B. MS LEEANN GUESS 782
Full Name (Last, First, Middle Initial)

Mailing Address 115 HONEYSUCKLE LN

City SAN ANTONIO State TX Zip Code 78213

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
 12 / 03 / 2013
Transaction ID : SA11AI.109262

Amount of Each Receipt this Period
 50.00

C. MR CRAIG A GUIDRY 750
Full Name (Last, First, Middle Initial)

Mailing Address 406 SUNSET COVE LN

City OAK POINT State TX Zip Code 75068

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

Name of Employer GBS PROPERTIES LLC Occupation REGISTERED AGENT

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 / 01 / 2013
Transaction ID : SA11AI.109289

Amount of Each Receipt this Period
 50.00

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: PAGE 254 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR CRAIG A GUIDRY 750
 Full Name (Last, First, Middle Initial)
 Mailing Address 406 SUNSET COVE LN
 City OAK POINT State TX Zip Code 75068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GBS PROPERTIES LLC Occupation REGISTERED AGENT
 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 / 30 / 2013
Transaction ID : SA11AI.109287
 Amount of Each Receipt this Period
 50.00

B. MR CRAIG A GUIDRY 750
 Full Name (Last, First, Middle Initial)
 Mailing Address 406 SUNSET COVE LN
 City OAK POINT State TX Zip Code 75068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GBS PROPERTIES LLC Occupation REGISTERED AGENT
 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
 12 / 30 / 2013
Transaction ID : SA11AI.109288
 Amount of Each Receipt this Period
 50.00

C. MR WILTON L GUILLORY 705
 Full Name (Last, First, Middle Initial)
 Mailing Address 1918 E MAIN ST
 City NEW IBERIA State LA Zip Code 70560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SMALL MANUFACTURING CO Occupation SELF EMPLOYED
 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 / 03 / 2013
Transaction ID : SA11AI.109299
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 130.00
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 255 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR WILTON L GUILLORY 705
 Full Name (Last, First, Middle Initial)
 Mailing Address 1918 E MAIN ST
 City NEW IBERIA State LA Zip Code 70560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SMALL MANUFACTURING CO Occupation SELF EMPLOYED
 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 / 13 / 2013
Transaction ID : SA11AI.109295
 Amount of Each Receipt this Period
 250.00

B. MS THELMA J GUNTRUM 160
 Full Name (Last, First, Middle Initial)
 Mailing Address 110 N MAPLE DR
 City BUTLER State PA Zip Code 16001
 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
 07 / 15 / 2013
Transaction ID : SA11AI.109360
 Amount of Each Receipt this Period
 75.00

C. MS THELMA J GUNTRUM 160
 Full Name (Last, First, Middle Initial)
 Mailing Address 110 N MAPLE DR
 City BUTLER State PA Zip Code 16001
 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
 10 / 15 / 2013
Transaction ID : SA11AI.109361
 Amount of Each Receipt this Period
 75.00

SUBTOTAL of Receipts This Page (optional).....▶	175.00
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 256 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial)
A. MS EUNICE E GUTMAN 305

Mailing Address 493 WESLEY MOUNTAIN DR
APT G28

City State Zip Code
BLAIRSVILLE GA 30512

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

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 23 / 2013
Transaction ID : SA11AI.109388

Amount of Each Receipt this Period

 50.00

Full Name (Last, First, Middle Initial)
B. MS PATRICIA J HAGBERG 550

Mailing Address PO BOX 179

City State Zip Code
LAKE ELMO MN 55042

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

Name of Employer Occupation
HAGBERG'S COUNTY MARKET GROCER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 03 / 2013
Transaction ID : SA11AI.109541

Amount of Each Receipt this Period

 150.00

Full Name (Last, First, Middle Initial)
C. MS PATRICIA J HAGBERG 550

Mailing Address PO BOX 179

City State Zip Code
LAKE ELMO MN 55042

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

Name of Employer Occupation
HAGBERG'S COUNTY MARKET GROCER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 17 / 2013
Transaction ID : SA11AI.109540

Amount of Each Receipt this Period

 100.00

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

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

.
 300.00

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

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

FOR LINE NUMBER: PAGE 257 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR DANIEL HAINES 928
 Full Name (Last, First, Middle Initial)
 Mailing Address 1240 S CLAUDINA ST
 City ANAHEIM State CA Zip Code 92805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 13 / 2013
Transaction ID : SA11AI.109626
 Amount of Each Receipt this Period
 500.00

B. MR WAYNE HALES 841
 Full Name (Last, First, Middle Initial)
 Mailing Address 303 A ST APT 102
 City SALT LAKE CITY State UT Zip Code 84103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 28 / 2013
Transaction ID : SA11AI.109666
 Amount of Each Receipt this Period
 100.00

C. MR RICKY N HALL 283
 Full Name (Last, First, Middle Initial)
 Mailing Address 3468 BARBWIRE RD
 City ROSEBORO State NC Zip Code 28382
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 13 / 2013
Transaction ID : SA11AI.109695
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 850.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 258 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MRS JEANNEANE HALL 672
 Full Name (Last, First, Middle Initial)
 Mailing Address 14 N SAINT JAMES PL
 City EASTBOROUGH State KS Zip Code 67206
 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 ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 06 / 2013
Transaction ID : SA11Al.109716
 Amount of Each Receipt this Period
 250.00

B. MRS JANET B HALL 846
 Full Name (Last, First, Middle Initial)
 Mailing Address 10 S 400 W
 City MANTI State UT Zip Code 84642
 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
 08 / 27 / 2013
Transaction ID : SA11Al.109739
 Amount of Each Receipt this Period
 75.00

C. MRS JANET B HALL 846
 Full Name (Last, First, Middle Initial)
 Mailing Address 10 S 400 W
 City MANTI State UT Zip Code 84642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 27 / 2013
Transaction ID : SA11Al.109737
 Amount of Each Receipt this Period
 75.00

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 259 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MRS JANET B HALL 846
 Full Name (Last, First, Middle Initial)
 Mailing Address 10 S 400 W
 City MANTI State UT Zip Code 84642
 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
 12 / 19 / 2013
Transaction ID : SA11AI.109738
 Amount of Each Receipt this Period
 25.00

B. STUYVE HAMERSLEY 863
 Full Name (Last, First, Middle Initial)
 Mailing Address 2900 W LIVE OAK DR
 City PRESCOTT State AZ Zip Code 86305
 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 / 18 / 2013
Transaction ID : SA11AI.109793
 Amount of Each Receipt this Period
 1000.00

C. MR JACK HAMMER 321
 Full Name (Last, First, Middle Initial)
 Mailing Address 1500 HANCOCK AVE APT 501
 City DAYTONA BEACH State FL Zip Code 32114
 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
 10 / 29 / 2013
Transaction ID : SA11AI.109845
 Amount of Each Receipt this Period
 75.00

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 260 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS KATHRYN HAMPTON-DUTY 405		Date of Receipt
Mailing Address 617 SEVERN WAY		<input type="text" value="07"/> / <input type="text" value="08"/> / <input type="text" value="2013"/>
City	State	Zip Code
LEXINGTON	KY	40503
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.109896
Name of Employer	Occupation	Amount of Each Receipt this Period
PME INCORPORATED	RETIRED	<input type="text" value="50.00"/>
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. MS KATHRYN HAMPTON-DUTY 405		Date of Receipt
Mailing Address 617 SEVERN WAY		<input type="text" value="08"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Zip Code
LEXINGTON	KY	40503
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.109897
Name of Employer	Occupation	Amount of Each Receipt this Period
PME INCORPORATED	RETIRED	<input type="text" value="50.00"/>
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"/>	

Full Name (Last, First, Middle Initial) C. MS KATHRYN HAMPTON-DUTY 405		Date of Receipt
Mailing Address 617 SEVERN WAY		<input type="text" value="12"/> / <input type="text" value="10"/> / <input type="text" value="2013"/>
City	State	Zip Code
LEXINGTON	KY	40503
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.109898
Name of Employer	Occupation	Amount of Each Receipt this Period
PME INCORPORATED	RETIRED	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="400.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="150.00"/>
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 261 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MRS LEIGH HAMPTON 338
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 1608
 City LAKELAND State FL Zip Code 33802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation CATTLE RANCHER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **750.00**

Date of Receipt **08 / 13 / 2013**
Transaction ID : SA11AI.109891
 Amount of Each Receipt this Period **50.00**

B. MS PEGGY J HAMRICK 993
 Full Name (Last, First, Middle Initial)
 Mailing Address 3324 W 19TH AVE TRLR 101
 City KENNEWICK State WA Zip Code 99338
 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 **10 / 11 / 2013**
Transaction ID : SA11AI.109902
 Amount of Each Receipt this Period **100.00**

C. MRS MARTHA HAND 319
 Full Name (Last, First, Middle Initial)
 Mailing Address 1660 FLOURNOY DR
 City COLUMBUS State GA Zip Code 31906
 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 **220.00**

Date of Receipt **11 / 13 / 2013**
Transaction ID : SA11AI.109925
 Amount of Each Receipt this Period **220.00**

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 262 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS MARY A HANNA 479
 Full Name (Last, First, Middle Initial)
 Mailing Address 2305 BENNETT RD
 City LAFAYETTE State IN Zip Code 47909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 26 / 2013
Transaction ID : SA11AI.144776
 Amount of Each Receipt this Period
 25.00

B. MR ROBERT HANNWEBER 321
 Full Name (Last, First, Middle Initial)
 Mailing Address 9 WAGNER PL
 City PALM COAST State FL Zip Code 32164
 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
 07 / 03 / 2013
Transaction ID : SA11AI.110006
 Amount of Each Receipt this Period
 75.00

C. MR ROBERT HANNWEBER 321
 Full Name (Last, First, Middle Initial)
 Mailing Address 9 WAGNER PL
 City PALM COAST State FL Zip Code 32164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 02 / 2013
Transaction ID : SA11AI.110007
 Amount of Each Receipt this Period
 50.00

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 263 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR M J HANSEN 731
 Full Name (Last, First, Middle Initial)
 Mailing Address 2315 NW 22ND ST
 City OKLAHOMA CITY State OK Zip Code 73107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer THE BOULEVARD CAFETERIA Occupation CLERK
 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
 12 / 13 / 2013
Transaction ID : SA11AI.110039
 Amount of Each Receipt this Period
 50.00

B. MS NANCY M HAPPEL 152
 Full Name (Last, First, Middle Initial)
 Mailing Address 117 WOODSHIRE RD
 City PITTSBURGH State PA Zip Code 15215
 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 ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2013
Transaction ID : SA11AI.110084
 Amount of Each Receipt this Period
 225.00

C. MR MICHAEL HARDWICK 298
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 549
 City MONTMORENCI State SC Zip Code 29839
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 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
 11 / 22 / 2013
Transaction ID : SA11AI.110140
 Amount of Each Receipt this Period
 50.00

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: PAGE 264 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS EFFIE C HARDY 708
 Full Name (Last, First, Middle Initial)
 Mailing Address 1613 OBRIEN DR
 City State Zip Code
 BATON ROUGE LA 70810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE HOMEMAKER
 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
 10 / 14 / 2013
Transaction ID : SA11AI.110154
 Amount of Each Receipt this Period
 50.00

B. MR ANGELINE J HARING 448
 Full Name (Last, First, Middle Initial)
 Mailing Address 825 ALEXANDER RD W
 City State Zip Code
 BELLVILLE OH 44813
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 COMFORT INN FRONT DESK
 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
 12 / 18 / 2013
Transaction ID : SA11AI.110161
 Amount of Each Receipt this Period
 100.00

C. MS ELIZABETH R HARPER 034
 Full Name (Last, First, Middle Initial)
 Mailing Address 55 SHERWIN HILL RD
 City State Zip Code
 RINDGE NH 03461
 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
 07 / 26 / 2013
Transaction ID : SA11AI.110222
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 180.00
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 265 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS ELIZABETH R HARPER 034
 Full Name (Last, First, Middle Initial)
 Mailing Address 55 SHERWIN HILL RD
 City RINDGE State NH Zip Code 03461
 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
 10 / 01 / 2013
Transaction ID : SA11AI.110220
 Amount of Each Receipt this Period
 25.00

B. MS ELIZABETH R HARPER 034
 Full Name (Last, First, Middle Initial)
 Mailing Address 55 SHERWIN HILL RD
 City RINDGE State NH Zip Code 03461
 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 ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2013
Transaction ID : SA11AI.110221
 Amount of Each Receipt this Period
 30.00

C. MS ELIZABETH R HARPER 034
 Full Name (Last, First, Middle Initial)
 Mailing Address 55 SHERWIN HILL RD
 City RINDGE State NH Zip Code 03461
 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 ▼ 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2013
Transaction ID : SA11AI.110223
 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: PAGE 266 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR THOMAS R HARPER 770
 Full Name (Last, First, Middle Initial)
 Mailing Address 17525 PONDEROSA PINES DR
 City HOUSTON State TX Zip Code 77090
 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 / D D / Y Y Y Y Y
 07 / 15 / 2013
Transaction ID : SA11AI.110240
 Amount of Each Receipt this Period
 200.00

B. MR THOMAS R HARPER 770
 Full Name (Last, First, Middle Initial)
 Mailing Address 17525 PONDEROSA PINES DR
 City HOUSTON State TX Zip Code 77090
 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 ▼ 699.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 06 / 2013
Transaction ID : SA11AI.110241
 Amount of Each Receipt this Period
 299.00

C. MR THOMAS R HARPER 770
 Full Name (Last, First, Middle Initial)
 Mailing Address 17525 PONDEROSA PINES DR
 City HOUSTON State TX Zip Code 77090
 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 / D D / Y Y Y Y Y
 12 / 19 / 2013
Transaction ID : SA11AI.110236
 Amount of Each Receipt this Period
 -299.00

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 268 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS SUZANNE HARTSON 444
 Full Name (Last, First, Middle Initial)
 Mailing Address 629 OHIO AVE
 City State Zip Code
 MC DONALD OH 44437
 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 / 2013
Transaction ID : SA11Al.110475
 Amount of Each Receipt this Period
 25.00

B. MS SUZANNE HARTSON 444
 Full Name (Last, First, Middle Initial)
 Mailing Address 629 OHIO AVE
 City State Zip Code
 MC DONALD OH 44437
 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
 10 / 07 / 2013
Transaction ID : SA11Al.110477
 Amount of Each Receipt this Period
 20.00

C. MS SUZANNE HARTSON 444
 Full Name (Last, First, Middle Initial)
 Mailing Address 629 OHIO AVE
 City State Zip Code
 MC DONALD OH 44437
 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 ▼
 285.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 12 / 2013
Transaction ID : SA11Al.110476
 Amount of Each Receipt this Period
 40.00

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: (check only one)	PAGE 269 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR MARTHA HATCH 878
 Full Name (Last, First, Middle Initial)
 Mailing Address 1217 APACHE DR
 City SOCORRO State NM Zip Code 87801
 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
 07 / 15 / 2013
Transaction ID : SA11AI.110541
 Amount of Each Receipt this Period
 175.00

B. MR GUY HATFIELD 925
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 891540
 City TEMECULA State CA Zip Code 92589
 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
 07 / 03 / 2013
Transaction ID : SA11AI.110548
 Amount of Each Receipt this Period
 225.00

C. MR ROBERT L HAWKINS 651
 Full Name (Last, First, Middle Initial)
 Mailing Address 4208B WILLOWLAKE CT
 City JEFFERSON CITY State MO Zip Code 65109
 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 / 20 / 2013
Transaction ID : SA11AI.110636
 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 270 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR ROBERT L HAWKINS 651
 Full Name (Last, First, Middle Initial)
 Mailing Address 4208B WILLOWLAKE CT
 City State Zip Code
 JEFFERSON CITY MO 65109
 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
 11 / 11 / 2013
Transaction ID : SA11Al.110635
 Amount of Each Receipt this Period
 200.00

B. MR LESTER J HAWKINS 972
 Full Name (Last, First, Middle Initial)
 Mailing Address 4473 SE ALDERCREST RD
 City State Zip Code
 MILWAUKIE OR 97222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 OREGON DECORATIVE ROCK INC LANDSCAPE STONE
 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 / 21 / 2013
Transaction ID : SA11Al.110647
 Amount of Each Receipt this Period
 100.00

C. MR LESTER J HAWKINS 972
 Full Name (Last, First, Middle Initial)
 Mailing Address 4473 SE ALDERCREST RD
 City State Zip Code
 MILWAUKIE OR 97222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 OREGON DECORATIVE ROCK INC LANDSCAPE STONE
 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
 10 / 18 / 2013
Transaction ID : SA11Al.110645
 Amount of Each Receipt this Period
 100.00

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 271 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR LESTER J HAWKINS 972
 Full Name (Last, First, Middle Initial)
 Mailing Address 4473 SE ALDERCREST RD
 City State Zip Code
 MILWAUKIE OR 97222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 OREGON DECORATIVE ROCK INC LANDSCAPE STONE
 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
 12 / 02 / 2013
Transaction ID : SA11Al.110646
 Amount of Each Receipt this Period
 100.00

B. MR JAMES T HAYES 234
 Full Name (Last, First, Middle Initial)
 Mailing Address 4852 BRIGADOON DR
 City State Zip Code
 VIRGINIA BEACH VA 23455
 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
 10 / 11 / 2013
Transaction ID : SA11Al.110679
 Amount of Each Receipt this Period
 125.00

C. MR FORREST D HAYES 299
 Full Name (Last, First, Middle Initial)
 Mailing Address 56 WEXFORD ON THE GRN
 City State Zip Code
 HILTON HEAD ISLAND SC 29928
 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
 11 / 18 / 2013
Transaction ID : SA11Al.110681
 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 272 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS MARY HAYNES 339

Full Name (Last, First, Middle Initial)
Mailing Address 16295 DAVIS RD
LOT 4

City FORT MYERS State FL Zip Code 33908

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
09 / 24 / 2013
Transaction ID : SA11Al.110711

Amount of Each Receipt this Period
50.00

B. MS MARY HAYNES 339

Full Name (Last, First, Middle Initial)
Mailing Address 16295 DAVIS RD
LOT 4

City FORT MYERS State FL Zip Code 33908

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
12 / 24 / 2013
Transaction ID : SA11Al.110710

Amount of Each Receipt this Period
50.00

C. MR PAUL H HEALEY 330

Full Name (Last, First, Middle Initial)
Mailing Address 6650 ROYAL PALM BLVD
APT 314

City MARGATE State FL Zip Code 33063

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
07 / 08 / 2013
Transaction ID : SA11Al.110761

Amount of Each Receipt this Period
50.00

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 273 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS SHEILA HECHT 920
Full Name (Last, First, Middle Initial)
Mailing Address 3888 SILVERLEAF LN
City VISTA State CA Zip Code 92084
FEC ID number of contributing federal political committee. **C**
Name of Employer SHEILA HECHT Occupation SELF EMPLOYED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 265.00

Date of Receipt 09 / 05 / 2013
Transaction ID : SA11AI.110818
Amount of Each Receipt this Period 100.00

B. MS SHEILA HECHT 920
Full Name (Last, First, Middle Initial)
Mailing Address 3888 SILVERLEAF LN
City VISTA State CA Zip Code 92084
FEC ID number of contributing federal political committee. **C**
Name of Employer SHEILA HECHT Occupation SELF EMPLOYED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 290.00

Date of Receipt 09 / 12 / 2013
Transaction ID : SA11AI.144865
Amount of Each Receipt this Period 25.00

C. MS CATHY L HEIDE 972
Full Name (Last, First, Middle Initial)
Mailing Address 1522 NE 143RD AVE
City PORTLAND State OR Zip Code 97230
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 10 / 07 / 2013
Transaction ID : SA11AI.110885
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: PAGE 274 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS CATHY L HEIDE 972
 Full Name (Last, First, Middle Initial)
 Mailing Address 1522 NE 143RD AVE
 City PORTLAND State OR Zip Code 97230
 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
 10 / 07 / 2013
Transaction ID : SA11Al.110886
 Amount of Each Receipt this Period
 30.00

B. MR GEORGE P HEINRICH 852
 Full Name (Last, First, Middle Initial)
 Mailing Address 6289 E DUSTY COYOTE CIR
 City SCOTTSDALE State AZ Zip Code 85266
 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
 12 / 16 / 2013
Transaction ID : SA11Al.110928
 Amount of Each Receipt this Period
 150.00

C. MR LARRY D HELTON 650
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 375
 City ULMAN State MO Zip Code 65083
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DOG CREEK RANCH Occupation RANCHER
 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 / 2013
Transaction ID : SA11Al.110987
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 280.00
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 275 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. Sigwulf Hermann 991		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 21 / 2013 Transaction ID : SA11Al.144910
Mailing Address 4432 52nd Av Ne		Amount of Each Receipt this Period 500.00
City Seattle	State WA	Zip Code 99105
FEC ID number of contributing federal political committee. C	Name of Employer None	Occupation Retired
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. MS CAROLINE HERRICK 046		Date of Receipt M M M / D D D / Y Y Y Y Y Y 08 / 06 / 2013 Transaction ID : SA11Al.111263
Mailing Address 33 FALLS BRIDGE RD		Amount of Each Receipt this Period 100.00
City BLUE HILL	State ME	Zip Code 04614
FEC ID number of contributing federal political committee. C	Name of Employer PROFESSOR	Occupation EDUCATION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. MS CAROLINE HERRICK 046		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 11 / 2013 Transaction ID : SA11Al.111265
Mailing Address 33 FALLS BRIDGE RD		Amount of Each Receipt this Period 100.00
City BLUE HILL	State ME	Zip Code 04614
FEC ID number of contributing federal political committee. C	Name of Employer PROFESSOR	Occupation EDUCATION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 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:	PAGE 276 OF 724
	(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

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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS CAROLINE HERRICK 046		Date of Receipt
Mailing Address 33 FALLS BRIDGE RD		<input type="text" value="11"/> / <input type="text" value="18"/> / <input type="text" value="2013"/>
City	State	Transaction ID : SA11Al.111264
BLUE HILL	ME	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	Zip Code	<input type="text" value="50.00"/>
	04614	
Name of Employer	Occupation	
PROFESSOR	EDUCATION	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="450.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MS CHERYL HERRITT 352		Date of Receipt
Mailing Address 2017 LAKE HEATHER DR		<input type="text" value="12"/> / <input type="text" value="10"/> / <input type="text" value="2013"/>
City	State	Transaction ID : SA11Al.111288
BIRMINGHAM	AL	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	Zip Code	<input type="text" value="100.00"/>
	35242	
Name of Employer	Occupation	
HERRITT BUSINESS ASSOCIATES	SELF EMPLOYED	
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 CHERYL HERRITT 352		Date of Receipt
Mailing Address 2017 LAKE HEATHER DR		<input type="text" value="12"/> / <input type="text" value="16"/> / <input type="text" value="2013"/>
City	State	Transaction ID : SA11Al.111287
BIRMINGHAM	AL	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	Zip Code	<input type="text" value="100.00"/>
	35242	
Name of Employer	Occupation	
HERRITT BUSINESS ASSOCIATES	SELF EMPLOYED	
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) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="250.00"/>
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 277 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MRS DORIS E HERRMANN 402
 Full Name (Last, First, Middle Initial)
 Mailing Address 3923 OLD BROWNSBORO RD
 City State Zip Code
 LOUISVILLE KY 40207
 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 / 04 / 2013
Transaction ID : SA11AI.111292
 Amount of Each Receipt this Period
 100.00

B. MRS DORIS E HERRMANN 402
 Full Name (Last, First, Middle Initial)
 Mailing Address 3923 OLD BROWNSBORO RD
 City State Zip Code
 LOUISVILLE KY 40207
 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
 12 / 04 / 2013
Transaction ID : SA11AI.111291
 Amount of Each Receipt this Period
 100.00

C. MR MIKE HERRON 747
 Full Name (Last, First, Middle Initial)
 Mailing Address 4015 N 1ST AVE
 City State Zip Code
 DURANT OK 74701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 TOWNHOME PROPERTIES BUILDER
 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 / 16 / 2013
Transaction ID : SA11AI.111299
 Amount of Each Receipt this Period
 175.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00
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 278 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR THOMAS HERRON 775
 Full Name (Last, First, Middle Initial)
 Mailing Address 1426 COUNTY ROAD 47
 City ANGLETON State TX Zip Code 77515
 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
 12 / 23 / 2013
Transaction ID : SA11AI.111300
 Amount of Each Receipt this Period
 100.00

B. MS PHYLLIS HESS 614
 Full Name (Last, First, Middle Initial)
 Mailing Address 19485 N 1700TH RD
 City BUSHNELL State IL Zip Code 61422
 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 08 / 2013
Transaction ID : SA11AI.111345
 Amount of Each Receipt this Period
 400.00

C. MS PHYLLIS HESS 614
 Full Name (Last, First, Middle Initial)
 Mailing Address 19485 N 1700TH RD
 City BUSHNELL State IL Zip Code 61422
 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 ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 07 / 2013
Transaction ID : SA11AI.111346
 Amount of Each Receipt this Period
 250.00

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 279 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. CLETHA J HESSEL 740
 Full Name (Last, First, Middle Initial)
 Mailing Address 5112 W WOODLAND DR
 City State Zip Code
 STILLWATER OK 74074
 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 ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 05 / 2013
Transaction ID : SA11AI.111356
 Amount of Each Receipt this Period
 100.00

B. CLETHA J HESSEL 740
 Full Name (Last, First, Middle Initial)
 Mailing Address 5112 W WOODLAND DR
 City State Zip Code
 STILLWATER OK 74074
 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 ▼
 290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2013
Transaction ID : SA11AI.111354
 Amount of Each Receipt this Period
 50.00

C. CLETHA J HESSEL 740
 Full Name (Last, First, Middle Initial)
 Mailing Address 5112 W WOODLAND DR
 City State Zip Code
 STILLWATER OK 74074
 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 ▼
 390.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 04 / 2013
Transaction ID : SA11AI.111355
 Amount of Each Receipt this Period
 100.00

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 280 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR ROBERT HEWLETT 138
 Full Name (Last, First, Middle Initial)
 Mailing Address 2702 ST HWY 1
 City OTEGO State NY Zip Code 13825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 03 / 2013
Transaction ID : SA11Al.111403
 Amount of Each Receipt this Period
 40.00

B. MR ROBERT HEWLETT 138
 Full Name (Last, First, Middle Initial)
 Mailing Address 2702 ST HWY 1
 City OTEGO State NY Zip Code 13825
 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 ▼ 220.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 16 / 2013
Transaction ID : SA11Al.111404
 Amount of Each Receipt this Period
 15.00

C. MR ROBERT HEWLETT 138
 Full Name (Last, First, Middle Initial)
 Mailing Address 2702 ST HWY 1
 City OTEGO State NY Zip Code 13825
 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
 10 / 16 / 2013
Transaction ID : SA11Al.111402
 Amount of Each Receipt this Period
 30.00

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 281 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR MATTHEW M HICKMAN 847
 Full Name (Last, First, Middle Initial)
 Mailing Address 1209 W LEXINGTON ST
 City WASHINGTON State UT Zip Code 84780
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ACADEMY MORTGAGE Occupation MORTGAGE BROKER
 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 / 10 / 2013
Transaction ID : SA11Al.111447
 Amount of Each Receipt this Period
 100.00

B. MR MATTHEW M HICKMAN 847
 Full Name (Last, First, Middle Initial)
 Mailing Address 1209 W LEXINGTON ST
 City WASHINGTON State UT Zip Code 84780
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ACADEMY MORTGAGE Occupation MORTGAGE BROKER
 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
 10 / 10 / 2013
Transaction ID : SA11Al.111448
 Amount of Each Receipt this Period
 100.00

C. MS ECHO HICKORY 349
 Full Name (Last, First, Middle Initial)
 Mailing Address 1985 SE BENEDICTINE ST
 City PORT ST LUCIE State FL Zip Code 34983
 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
 12 / 27 / 2013
Transaction ID : SA11Al.111452
 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 282 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

A. AUDEL HICKS 770
 Full Name (Last, First, Middle Initial)
 Mailing Address 5223 SPANISH OAK DR
 City HOUSTON State TX Zip Code 77066
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INTERNATIONAL DIAMONDS Occupation JEWELER
 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
 11 / 05 / 2013
Transaction ID : SA11Al.111476
 Amount of Each Receipt this Period
 100.00

B. MS PATRICIA S HIGGINS 754
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 735
 City CUMBY State TX Zip Code 75433
 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 ▼ 435.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2013
Transaction ID : SA11Al.111531
 Amount of Each Receipt this Period
 100.00

C. MS PATRICIA S HIGGINS 754
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 735
 City CUMBY State TX Zip Code 75433
 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 ▼ 535.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2013
Transaction ID : SA11Al.111530
 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 283 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR LEWIS HILL 336
 Full Name (Last, First, Middle Initial)
 Mailing Address 31 W SPANISH MAIN ST
 City TAMPA State FL Zip Code 33609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 18 / 2013
Transaction ID : SA11Al.111588
 Amount of Each Receipt this Period
 100.00

B. MS SARA K HILL 454
 Full Name (Last, First, Middle Initial)
 Mailing Address 3658 SHROYER RD
 City KETTERING State OH Zip Code 45429
 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 ▼ 220.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 13 / 2013
Transaction ID : SA11Al.111603
 Amount of Each Receipt this Period
 20.00

C. MS SARA K HILL 454
 Full Name (Last, First, Middle Initial)
 Mailing Address 3658 SHROYER RD
 City KETTERING State OH Zip Code 45429
 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 ▼ 320.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 15 / 2013
Transaction ID : SA11Al.111604
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 220.00
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 284 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS PATRICIA M HINES 317
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 474

City	State	Zip Code
LESLIE	GA	31764

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

Name of Employer	Occupation
CITY OF LESLIE	CITY EMPLOYEE

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	/	2013

Transaction ID : SA11AI.111722

Amount of Each Receipt this Period

100.00

B. MS PATRICIA M HINES 317
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 474

City	State	Zip Code
LESLIE	GA	31764

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

Name of Employer	Occupation
CITY OF LESLIE	CITY EMPLOYEE

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
10	/	14	/	2013

Transaction ID : SA11AI.111725

Amount of Each Receipt this Period

50.00

C. MS PATRICIA M HINES 317
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 474

City	State	Zip Code
LESLIE	GA	31764

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

Name of Employer	Occupation
CITY OF LESLIE	CITY EMPLOYEE

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
12	/	18	/	2013

Transaction ID : SA11AI.111724

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 285 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR DONALD HINES 857
 Full Name (Last, First, Middle Initial)
 Mailing Address 8172 E GALINDA DR
 City TUCSON State AZ Zip Code 85750
 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
 10 / 07 / 2013
Transaction ID : SA11AI.111733
 Amount of Each Receipt this Period
 50.00

B. MR JOHN A HOCHSTETLER 435
 Full Name (Last, First, Middle Initial)
 Mailing Address 316 MEUSE ARGONNE ST
 City HICKSVILLE State OH Zip Code 43526
 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 ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2013
Transaction ID : SA11AI.111868
 Amount of Each Receipt this Period
 175.00

C. MR JOHN W HOCKETT 828
 Full Name (Last, First, Middle Initial)
 Mailing Address 720 WALTERS ST
 City BUFFALO State WY Zip Code 82834
 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
 07 / 05 / 2013
Transaction ID : SA11AI.111874
 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: PAGE 286 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS SANDRA D HOCKLEY 691
 Full Name (Last, First, Middle Initial)
 Mailing Address 303 E 14TH ST
 City COZAD State NE Zip Code 69130
 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 / 17 / 2013
Transaction ID : SA11AI.111877
 Amount of Each Receipt this Period
 100.00

B. MR WILLIE D HODGE 744
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 153
 City TAHLEQUAH State OK Zip Code 74465
 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
 09 / 03 / 2013
Transaction ID : SA11AI.111888
 Amount of Each Receipt this Period
 100.00

C. MR JEROME F HOELSCHER 797
 Full Name (Last, First, Middle Initial)
 Mailing Address 3702 COUNTY ROAD 125
 City GARDEN CITY State TX Zip Code 79739
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HOELSCHER INC Occupation FARMER
 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 / 03 / 2013
Transaction ID : SA11AI.111931
 Amount of Each Receipt this Period
 225.00

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 287 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR BRUCE HOFFMAN 217
 Full Name (Last, First, Middle Initial)
 Mailing Address 13024 SALEM AVE
 City HAGERSTOWN State MD Zip Code 21740
 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
 10 / 10 / 2013
Transaction ID : SA11AI.111956
 Amount of Each Receipt this Period
 50.00

B. MR BRUCE HOFFMAN 217
 Full Name (Last, First, Middle Initial)
 Mailing Address 13024 SALEM AVE
 City HAGERSTOWN State MD Zip Code 21740
 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
 11 / 26 / 2013
Transaction ID : SA11AI.111955
 Amount of Each Receipt this Period
 50.00

C. MR LARRY L HOFMANN 584
 Full Name (Last, First, Middle Initial)
 Mailing Address 3720 55TH AVE SE
 City MEDINA State ND Zip Code 58467
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CEO TRUNKING CUMPANY Occupation TRUCKER
 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
 10 / 21 / 2013
Transaction ID : SA11AI.111997
 Amount of Each Receipt this Period
 250.00

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 288 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR LARRY L HOFMANN 584		Date of Receipt
Mailing Address 3720 55TH AVE SE		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2013"/>
City	State	Zip Code
MEDINA	ND	58467
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
CEO TRUNKING CUMPANY	TRUCKER	
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"/>	
		Transaction ID : SA11Al.111998
		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>

Full Name (Last, First, Middle Initial) B. MR LINDSAY HOLCOMB 270		Date of Receipt
Mailing Address 410 CROSSINGHAM RD		<input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2013"/>
City	State	Zip Code
MOUNT AIRY	NC	27030
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="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	
		Transaction ID : SA11Al.112052
		Amount of Each Receipt this Period
		<input type="text" value="200.00"/>

Full Name (Last, First, Middle Initial) C. MR CLAIBORNE HOLLIS 391		Date of Receipt
Mailing Address PO BOX 2059		<input type="text" value="08"/> / <input type="text" value="26"/> / <input type="text" value="2013"/>
City	State	Zip Code
NATCHEZ	MS	39121
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
HOLLIS INVESTMENTS	INVESTMENT ADVISOR	
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"/>	
		Transaction ID : SA11Al.112139
		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="400.00"/>
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 289 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS CARMELITA HOLLOWAY 662		Date of Receipt
Mailing Address 11901 W 109TH ST APT 221		<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2013"/>
City OVERLAND PARK	State KS	Zip Code 66210
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.112159
Name of Employer NONE		Amount of Each Receipt this Period
Occupation RETIRED		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="275.00"/>	

Full Name (Last, First, Middle Initial) B. MS CARMELITA HOLLOWAY 662		Date of Receipt
Mailing Address 11901 W 109TH ST APT 221		<input type="text" value="12"/> / <input type="text" value="25"/> / <input type="text" value="2013"/>
City OVERLAND PARK	State KS	Zip Code 66210
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.112158
Name of Employer NONE		Amount of Each Receipt this Period
Occupation RETIRED		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="325.00"/>	

Full Name (Last, First, Middle Initial) C. MR EARL C HOLMES 063 JR		Date of Receipt
Mailing Address 6 ROXWOOD RD		<input type="text" value="09"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>
City QUAKER HILL	State CT	Zip Code 06375
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.112178
Name of Employer NONE		Amount of Each Receipt this Period
Occupation RETIRED		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="230.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="150.00"/>
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 290 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR EARL C HOLMES 063 JR
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 ROXWOOD RD
 City State Zip Code
 QUAKER HILL CT 06375
 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 ▼
 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2013
Transaction ID : SA11Al.112177
 Amount of Each Receipt this Period
 50.00

B. MR STANLEY W HOLMES 856
 Full Name (Last, First, Middle Initial)
 Mailing Address 13465 E GARIGANS GULCH
 City State Zip Code
 VAIL AZ 85641
 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 / 14 / 2013
Transaction ID : SA11Al.112201
 Amount of Each Receipt this Period
 100.00

C. MR STANLEY W HOLMES 856
 Full Name (Last, First, Middle Initial)
 Mailing Address 13465 E GARIGANS GULCH
 City State Zip Code
 VAIL AZ 85641
 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 ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 14 / 2013
Transaction ID : SA11Al.112202
 Amount of Each Receipt this Period
 100.00

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 291 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS BETTIE W HOLSCHER 553
 Full Name (Last, First, Middle Initial)
 Mailing Address 13317 NATCHEZ AVE
 City SAVAGE State MN Zip Code 55378
 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 / D D / Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : SA11AI.112213
 Amount of Each Receipt this Period
 50.00

B. MR LESTER HOOSE 144
 Full Name (Last, First, Middle Initial)
 Mailing Address 6139 TUCKER RD
 City DANSVILLE State NY Zip Code 14437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 21 / 2013
Transaction ID : SA11AI.112314
 Amount of Each Receipt this Period
 100.00

C. MR LESTER HOOSE 144
 Full Name (Last, First, Middle Initial)
 Mailing Address 6139 TUCKER RD
 City DANSVILLE State NY Zip Code 14437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 25 / 2013
Transaction ID : SA11AI.112316
 Amount of Each Receipt this Period
 100.00

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 292 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS LAURA E HORN BROOK 021		Date of Receipt
Mailing Address 149 BROMFIELD ST		<input type="text" value="09"/> / <input type="text" value="24"/> / <input type="text" value="2013"/>
City	State	Zip Code
QUINCY	MA	02170
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.112402
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
NONE	HOMEMAKER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="220.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MS LAURA E HORN BROOK 021		Date of Receipt
Mailing Address 149 BROMFIELD ST		<input type="text" value="12"/> / <input type="text" value="24"/> / <input type="text" value="2013"/>
City	State	Zip Code
QUINCY	MA	02170
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.112400
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
NONE	HOMEMAKER	
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) ▼		

Full Name (Last, First, Middle Initial) C. MR JOE L HORTON 430		Date of Receipt
Mailing Address 1132 CONN WAY DR		<input type="text" value="08"/> / <input type="text" value="12"/> / <input type="text" value="2013"/>
City	State	Zip Code
HEATH	OH	43056
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.112445
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="175.00"/>
Name of Employer	Occupation	
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) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="275.00"/>
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 293 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR GARY J HOSENFELD 145
 Full Name (Last, First, Middle Initial)
 Mailing Address 12 ROCKHURST DR
 City PENFIELD State NY Zip Code 14526
 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 / D D / Y Y Y Y Y
 07 / 02 / 2013
Transaction ID : SA11AI.112460
 Amount of Each Receipt this Period
 150.00

B. MR GARY J HOSENFELD 145
 Full Name (Last, First, Middle Initial)
 Mailing Address 12 ROCKHURST DR
 City PENFIELD State NY Zip Code 14526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 02 / 2013
Transaction ID : SA11AI.112459
 Amount of Each Receipt this Period
 150.00

C. MS ELAINE M HOSETH 587
 Full Name (Last, First, Middle Initial)
 Mailing Address 5051 77TH AVE NW
 City STANLEY State ND Zip Code 58784
 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 ▼ 470.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 10 / 2013
Transaction ID : SA11AI.112461
 Amount of Each Receipt this Period
 100.00

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: (check only one)	PAGE 294 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS ELAINE M HOSETH 587		Date of Receipt
Mailing Address 5051 77TH AVE NW		<input type="text" value="10"/> / <input type="text" value="09"/> / <input type="text" value="2013"/>
City	State	Zip Code
STANLEY	ND	58784
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.112462
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="570.00"/>	

Full Name (Last, First, Middle Initial) B. MR DANNY L HOSFIELD 662		Date of Receipt
Mailing Address 9241 HIGH DR		<input type="text" value="09"/> / <input type="text" value="06"/> / <input type="text" value="2013"/>
City	State	Zip Code
LEAWOOD	KS	66206
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.112472
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	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="225.00"/>	

Full Name (Last, First, Middle Initial) C. MR DANNY L HOSFIELD 662		Date of Receipt
Mailing Address 9241 HIGH DR		<input type="text" value="12"/> / <input type="text" value="06"/> / <input type="text" value="2013"/>
City	State	Zip Code
LEAWOOD	KS	66206
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.112471
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	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="300.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="250.00"/>
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 295 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR BARRON HOUSEL 275
 Full Name (Last, First, Middle Initial)
 Mailing Address 702 KENSINGTON DR
 City State Zip Code
 CHAPEL HILL NC 27514
 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 / 09 / 2013
Transaction ID : SA11AI.112534
 Amount of Each Receipt this Period
 100.00

B. MRS IVA M HOWARD 501
 Full Name (Last, First, Middle Initial)
 Mailing Address 10 PALMER ST
 City State Zip Code
 MARSHALLTOWN IA 50158
 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 / 11 / 2013
Transaction ID : SA11AI.112604
 Amount of Each Receipt this Period
 100.00

C. MRS IVA M HOWARD 501
 Full Name (Last, First, Middle Initial)
 Mailing Address 10 PALMER ST
 City State Zip Code
 MARSHALLTOWN IA 50158
 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 ▼
 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2013
Transaction ID : SA11AI.112605
 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 296 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR RONNIE HOWELL 788		Date of Receipt
Mailing Address 2400 VETERANS BLVD STE 16C		<input type="text" value="08"/> / <input type="text" value="29"/> / <input type="text" value="2013"/>
City	State	Zip Code
DEL RIO	TX	78840
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.112672
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="150.00"/>
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) ▼	<input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) B. MR RONNIE HOWELL 788		Date of Receipt
Mailing Address 2400 VETERANS BLVD STE 16C		<input type="text" value="10"/> / <input type="text" value="14"/> / <input type="text" value="2013"/>
City	State	Zip Code
DEL RIO	TX	78840
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.112671
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<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="checkbox"/> Other (specify) ▼	<input type="text" value="325.00"/>	

Full Name (Last, First, Middle Initial) C. MR RONNIE HOWELL 788		Date of Receipt
Mailing Address 2400 VETERANS BLVD STE 16C		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City	State	Zip Code
DEL RIO	TX	78840
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.112673
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="150.00"/>
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) ▼	<input type="text" value="475.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="375.00"/>
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 297 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR RONNIE HOWELL 788
 Full Name (Last, First, Middle Initial)
 Mailing Address 2400 VETERANS BLVD
 STE 16C
 City DEL RIO State TX Zip Code 78840
 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 M / D D D / Y Y Y Y Y Y
 12 / 16 / 2013
Transaction ID : SA11AI.112670
 Amount of Each Receipt this Period
 200.00

B. MS BERNICE E HOWELL 837
 Full Name (Last, First, Middle Initial)
 Mailing Address 6703 DORIAN ST
 City BOISE State ID Zip Code 83709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 27 / 2013
Transaction ID : SA11AI.112674
 Amount of Each Receipt this Period
 100.00

C. MS BERNICE E HOWELL 837
 Full Name (Last, First, Middle Initial)
 Mailing Address 6703 DORIAN ST
 City BOISE State ID Zip Code 83709
 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2013
Transaction ID : SA11AI.112675
 Amount of Each Receipt this Period
 100.00

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 298 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS BERNICE E HOWELL 837
 Full Name (Last, First, Middle Initial)
 Mailing Address 6703 DORIAN ST
 City BOISE State ID Zip Code 83709
 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 ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 27 / 2013
Transaction ID : SA11AI.112676
 Amount of Each Receipt this Period
 100.00

B. MR LEWIS HOWELL 937
 Full Name (Last, First, Middle Initial)
 Mailing Address 325 E SHIELDS AVE
 City FRESNO State CA Zip Code 93704
 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
 11 / 12 / 2013
Transaction ID : SA11AI.112686
 Amount of Each Receipt this Period
 50.00

C. MR JAMES P HUCK 573
 Full Name (Last, First, Middle Initial)
 Mailing Address 41392 243RD ST
 City ARTESIAN State SD Zip Code 57314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation FARMER
 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
 11 / 26 / 2013
Transaction ID : SA11AI.112748
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 185.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 299 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS MARIAN S HUDSON 320
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 2469
 City LAKE CITY State FL Zip Code 32056
 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
 10 / 28 / 2013
Transaction ID : SA11Al.112772
 Amount of Each Receipt this Period
 75.00

B. MRS DEBORA A HUFFMAN 961
 Full Name (Last, First, Middle Initial)
 Mailing Address 4982 COUNTY ROAD 124
 City TULELAKE State CA Zip Code 96134
 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 ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 17 / 2013
Transaction ID : SA11Al.112812
 Amount of Each Receipt this Period
 100.00

C. MR JOHN M HUNNICUTT 325
 Full Name (Last, First, Middle Initial)
 Mailing Address 4754 HICKORY SHORES BLVD
 City GULF BREEZE State FL Zip Code 32563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HUNNICUTT INSURANCE CO Occupation INSURANCE BROKER
 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 / 27 / 2013
Transaction ID : SA11Al.112954
 Amount of Each Receipt this Period
 100.00

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 300 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR JOHN M HUNNICUTT 325
 Full Name (Last, First, Middle Initial)
 Mailing Address 4754 HICKORY SHORES BLVD

City GULF BREEZE	State FL	Zip Code 32563
---------------------	-------------	-------------------

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

Name of Employer HUNNICUTT INSURANCE CO	Occupation INSURANCE BROKER
--------------------------------------------	--------------------------------

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
 11 / 27 / 2013
Transaction ID : SA11AI.112955

Amount of Each Receipt this Period
 100.00

B. MS DOROTHY M HUNTER 082
 Full Name (Last, First, Middle Initial)
 Mailing Address 268 SIXTH AVE

City CAPE MAY	State NJ	Zip Code 08204
------------------	-------------	-------------------

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
 12 / 18 / 2013
Transaction ID : SA11AI.113006

Amount of Each Receipt this Period
 50.00

C. MS PATRICIA HUNTER 950
 Full Name (Last, First, Middle Initial)
 Mailing Address 335 PENN WAY

City LOS GATOS	State CA	Zip Code 95032
-------------------	-------------	-------------------

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 / 08 / 2013
Transaction ID : SA11AI.113031

Amount of Each Receipt this Period
 100.00

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 301 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS PATRICIA HUNTER 950
 Full Name (Last, First, Middle Initial)
 Mailing Address 335 PENN WAY
 City LOS GATOS State CA Zip Code 95032
 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
 10 / 08 / 2013
Transaction ID : SA11AI.113034
 Amount of Each Receipt this Period
 100.00

B. MS JANET D HUTCHESON 337
 Full Name (Last, First, Middle Initial)
 Mailing Address 557 PALMETTO RD
 City BELLEAIR State FL Zip Code 33756
 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 ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 25 / 2013
Transaction ID : SA11AI.113092
 Amount of Each Receipt this Period
 175.00

C. MS JANET D HUTCHESON 337
 Full Name (Last, First, Middle Initial)
 Mailing Address 557 PALMETTO RD
 City BELLEAIR State FL Zip Code 33756
 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 ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2013
Transaction ID : SA11AI.113093
 Amount of Each Receipt this Period
 175.00

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 302 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS VIRGINIA N HUTCHINGS 778
 Full Name (Last, First, Middle Initial)
 Mailing Address 444 FM 1155 N

City WASHINGTON	State TX	Zip Code 77880
--------------------	-------------	-------------------

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

Name of Employer HUTCHINGS CHARITABLE TRUST	Occupation TRUSTEE
------------------------------------------------	-----------------------

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 / 30 / 2013
Transaction ID : SA11AI.113094

Amount of Each Receipt this Period
 35.00

B. GLYNENE T HUTCHISON 797
 Full Name (Last, First, Middle Initial)
 Mailing Address 25 ARROYO SANTIAGO

City ODESSA	State TX	Zip Code 79762
----------------	-------------	-------------------

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 ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 03 / 2013
Transaction ID : SA11AI.113115

Amount of Each Receipt this Period
 100.00

C. MR VERNON G HUTFLESS 853
 Full Name (Last, First, Middle Initial)
 Mailing Address 13030 W WINDROSE DR

City EL MIRAGE	State AZ	Zip Code 85335
-------------------	-------------	-------------------

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
 11 / 25 / 2013
Transaction ID : SA11AI.113116

Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	155.00
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 303 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS ROSE B HUZZEY 797		Date of Receipt
Mailing Address 401 HELEN GREATHOUSE CIR APT 114		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
MIDLAND	TX	79707
FEC ID number of contributing federal political committee. C		Transaction ID : SA11AI.113149
Name of Employer NONE		Amount of Each Receipt this Period
Occupation RETIRED		<input type="text"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		35.00
Aggregate Year-to-Date ▼		<input type="text"/>
		210.00

Full Name (Last, First, Middle Initial) B. MS BETTYE ICE 797		Date of Receipt
Mailing Address 1311 S MURRAY AVE		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
MONAHANS	TX	79756
FEC ID number of contributing federal political committee. C		Transaction ID : SA11AI.113177
Name of Employer NONE		Amount of Each Receipt this Period
Occupation RETIRED		<input type="text"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		100.00
Aggregate Year-to-Date ▼		<input type="text"/>
		300.00

Full Name (Last, First, Middle Initial) C. MR GEORGE E IMBRAGULIO 394		Date of Receipt
Mailing Address 205 GRANDVIEW DR		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
ELLISVILLE	MS	39437
FEC ID number of contributing federal political committee. C		Transaction ID : SA11AI.113211
Name of Employer NONE		Amount of Each Receipt this Period
Occupation RETIRED		<input type="text"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		100.00
Aggregate Year-to-Date ▼		<input type="text"/>
		1100.00

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>
	235.00

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

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

FOR LINE NUMBER: PAGE 304 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. S FREDERICK ISAACS 741
 Full Name (Last, First, Middle Initial)
 Mailing Address 6137 S LOUISVILLE AVE
 City State Zip Code
 TULSA OK 74136
 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
 11 / 22 / 2013
Transaction ID : SA11AI.113316
 Amount of Each Receipt this Period
 100.00

B. MR MATTHEW S IVERSON 805
 Full Name (Last, First, Middle Initial)
 Mailing Address 1600 HARRIS DR
 City State Zip Code
 FORT COLLINS CO 80524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MSI ENTERPRISES INC OWNER
 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 / 29 / 2013
Transaction ID : SA11AI.113349
 Amount of Each Receipt this Period
 100.00

C. MS JEANNINE C IVY 775
 Full Name (Last, First, Middle Initial)
 Mailing Address 5201 SHANK RD
 City State Zip Code
 PEARLAND TX 77581
 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 ▼
 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2013
Transaction ID : SA11AI.113358
 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 305 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS PATRICIA L 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 NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 16 / 2013
Transaction ID : SA11Al.113487
 Amount of Each Receipt this Period
 35.00

B. MS PATRICIA L 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 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 / 19 / 2013
Transaction ID : SA11Al.113488
 Amount of Each Receipt this Period
 35.00

C. MS PATRICIA L 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 NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 07 / 2013
Transaction ID : SA11Al.113489
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional).....▶	105.00
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 306 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS PATRICIA L 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 NONE Occupation RETIRED
 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
 11 / 25 / 2013
Transaction ID : SA11Al.113490
 Amount of Each Receipt this Period
 35.00

B. MR JERRY J JACOBSON 446
 Full Name (Last, First, Middle Initial)
 Mailing Address 9760 YODER RD SW
 City SUGARCREEK State OH Zip Code 44681
 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 / D D / Y Y Y Y Y Y
 11 / 01 / 2013
Transaction ID : SA11Al.113492
 Amount of Each Receipt this Period
 100.00

C. MS MARY P JACOBSON 554
 Full Name (Last, First, Middle Initial)
 Mailing Address 5250 VERNON AVE S
 APT 321
 City MINNEAPOLIS State MN Zip Code 55436
 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
 10 / 18 / 2013
Transaction ID : SA11Al.113495
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	185.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 307 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS MARY P JACOBSON 554
 Full Name (Last, First, Middle Initial)
 Mailing Address 5250 VERNON AVE S
 APT 321
 City MINNEAPOLIS State MN Zip Code 55436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2013
Transaction ID : SA11AI.113494
 Amount of Each Receipt this Period
 250.00

B. MR DAVID JAMES 390
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 235
 City BELZONI State MS Zip Code 39038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DAVID JAMES EQUIPMENT CO Occupation BUSINESS OWNER
 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 / 08 / 2013
Transaction ID : SA11AI.113548
 Amount of Each Receipt this Period
 150.00

C. MS IRIS JAMES 741
 Full Name (Last, First, Middle Initial)
 Mailing Address 9260 S 85TH EAST AVE
 City TULSA State OK Zip Code 74133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer WALMART Occupation RETAILER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 22 / 2013
Transaction ID : SA11AI.113570
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional).....▶	210.00
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 308 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR DAVID F JAMES 983
 Full Name (Last, First, Middle Initial)
 Mailing Address 1713 WEATHERSWOOD DR NW
 City State Zip Code
 GIG HARBOR WA 98335
 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 ▼
 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2013
Transaction ID : SA11AI.113582
 Amount of Each Receipt this Period
 100.00

B. MR JAMES B JAMISON 613
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 21ST ST
 City State Zip Code
 MENDOTA IL 61342
 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 ▼
 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2013
Transaction ID : SA11AI.113598
 Amount of Each Receipt this Period
 50.00

C. MR JAMES B JAMISON 613
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 21ST ST
 City State Zip Code
 MENDOTA IL 61342
 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 ▼
 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2013
Transaction ID : SA11AI.113597
 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: (check only one)	PAGE 309 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS JANE K JANKE 287		Date of Receipt
Mailing Address 385 PARK ST		<input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2013"/>
City	State	Zip Code
COLUMBUS	NC	28722
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.113625
<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="225.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MS JUDITH JARAMILLO 923		Date of Receipt
Mailing Address 831 PEPPERWOOD ST		<input type="text" value="08"/> / <input type="text" value="26"/> / <input type="text" value="2013"/>
City	State	Zip Code
COLTON	CA	92324
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.113647
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="150.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="350.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MS JUDITH JARAMILLO 923		Date of Receipt
Mailing Address 831 PEPPERWOOD ST		<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2013"/>
City	State	Zip Code
COLTON	CA	92324
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.113648
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<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="450.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="275.00"/>
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 310 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR AL JARMAN 231
Full Name (Last, First, Middle Initial)

Mailing Address 527 MORSE POINT RD

City PORT HAYWOOD State VA Zip Code 23138

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
 11 / 26 / 2013
Transaction ID : SA11Al.113655

Amount of Each Receipt this Period
 50.00

B. MS BARBARA A JARVIS 770
Full Name (Last, First, Middle Initial)

Mailing Address 13923 DUNCANNON DR

City HOUSTON State TX Zip Code 77015

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : SA11Al.113672

Amount of Each Receipt this Period
 100.00

C. MS BARBARA A JARVIS 770
Full Name (Last, First, Middle Initial)

Mailing Address 13923 DUNCANNON DR

City HOUSTON State TX Zip Code 77015

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
 12 / 05 / 2013
Transaction ID : SA11Al.113673

Amount of Each Receipt this Period
 175.00

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 311 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS JUDITH A JESTER 329
 Full Name (Last, First, Middle Initial)
 Mailing Address 913 BAHIA MAR RD
 City VERO BEACH State FL Zip Code 32963
 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
 12 / 16 / 2013
Transaction ID : SA11AI.113868
 Amount of Each Receipt this Period
 300.00

B. MS MARGARET L JOBE 661
 Full Name (Last, First, Middle Initial)
 Mailing Address 23 S 65TH ST
 City KANSAS CITY State KS Zip Code 66111
 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
 11 / 11 / 2013
Transaction ID : SA11AI.113895
 Amount of Each Receipt this Period
 100.00

C. MR PETER JOCK 349
 Full Name (Last, First, Middle Initial)
 Mailing Address 12370 PIPER CUB TER
 City PORT SAINT LUCIE State FL Zip Code 34987
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PLATINIUM TRANSPORTATION Occupation TRUCKER
 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
 12 / 20 / 2013
Transaction ID : SA11AI.113898
 Amount of Each Receipt this Period
 175.00

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 312 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS PATRICIA JOHNSON 078
 Full Name (Last, First, Middle Initial)
 Mailing Address 161 RESERVOIR AVE
 City RANDOLPH State NJ Zip Code 07869
 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 ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2013
Transaction ID : SA11AI.113959
 Amount of Each Receipt this Period
 50.00

B. MR ELDRIDGE R JOHNSON 190
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 467
 City EDGEMONT State PA Zip Code 19028
 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 ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 13 / 2013
Transaction ID : SA11AI.113975
 Amount of Each Receipt this Period
 250.00

C. MR ELDRIDGE R JOHNSON 190
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 467
 City EDGEMONT State PA Zip Code 19028
 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 ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2013
Transaction ID : SA11AI.113974
 Amount of Each Receipt this Period
 50.00

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 313 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR MATTHEW Z JOHNSON 206
 Full Name (Last, First, Middle Initial)
 Mailing Address 98 RADCLIFFE DR
 City HUNTINGTOWN State MD Zip Code 20639
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TSM CORP Occupation EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 04 / 2013
Transaction ID : SA11AI.113983
 Amount of Each Receipt this Period
 300.00

B. MS GAYLA R JOHNSON 231
 Full Name (Last, First, Middle Initial)
 Mailing Address 104 SHIELDS POYNT
 City WILLIAMSBURG State VA Zip Code 23188
 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
 11 / 28 / 2013
Transaction ID : SA11AI.114000
 Amount of Each Receipt this Period
 50.00

C. MS GAYLA R JOHNSON 231
 Full Name (Last, First, Middle Initial)
 Mailing Address 104 SHIELDS POYNT
 City WILLIAMSBURG State VA Zip Code 23188
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 09 / 2013
Transaction ID : SA11AI.114001
 Amount of Each Receipt this Period
 100.00

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: PAGE 314 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR JAMES R JOHNSON 275
 Full Name (Last, First, Middle Initial)
 Mailing Address 1671 GALILEE RD
 City SMITHFIELD State NC Zip Code 27577
 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 / 02 / 2013
Transaction ID : SA11AI.114018
 Amount of Each Receipt this Period
 30.00

B. MS EVELYN JOHNSON 326
 Full Name (Last, First, Middle Initial)
 Mailing Address 219 SE 5TH AVE
 City MELROSE State FL Zip Code 32666
 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
 12 / 10 / 2013
Transaction ID : SA11AI.114045
 Amount of Each Receipt this Period
 35.00

C. MR SYBIL JOHNSON 352
 Full Name (Last, First, Middle Initial)
 Mailing Address 636 PADEN DR
 City BIRMINGHAM State AL Zip Code 35226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer WILLOW HOUSE Occupation SALESMAN
 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 / 07 / 2013
Transaction ID : SA11AI.114062
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 115.00
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 315 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR SYBIL JOHNSON 352
 Full Name (Last, First, Middle Initial)
 Mailing Address 636 PADEN DR
 City BIRMINGHAM State AL Zip Code 35226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 WILLOW HOUSE SALESMAN
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 12 / 2013
Transaction ID : SA11Al.114064
 Amount of Each Receipt this Period
 50.00

B. MR SYBIL JOHNSON 352
 Full Name (Last, First, Middle Initial)
 Mailing Address 636 PADEN DR
 City BIRMINGHAM State AL Zip Code 35226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 WILLOW HOUSE SALESMAN
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 335.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2013
Transaction ID : SA11Al.114061
 Amount of Each Receipt this Period
 50.00

C. MR SYBIL JOHNSON 352
 Full Name (Last, First, Middle Initial)
 Mailing Address 636 PADEN DR
 City BIRMINGHAM State AL Zip Code 35226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 WILLOW HOUSE SALESMAN
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 385.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 11 / 2013
Transaction ID : SA11Al.114060
 Amount of Each Receipt this Period
 50.00

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 316 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS GERALDINE F JOHNSON 460		Date of Receipt
Mailing Address 1074 TIMBER CREEK DR UNIT 1		<input type="text" value="09"/> / <input type="text" value="20"/> / <input type="text" value="2013"/>
City	State	Transaction ID : SA11AI.114099
CARMEL	IN	Amount of Each Receipt this Period
Zip Code		<input type="text" value="75.00"/>
46032		
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="225.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MS GERALDINE F JOHNSON 460		Date of Receipt
Mailing Address 1074 TIMBER CREEK DR UNIT 1		<input type="text" value="11"/> / <input type="text" value="19"/> / <input type="text" value="2013"/>
City	State	Transaction ID : SA11AI.114098
CARMEL	IN	Amount of Each Receipt this Period
Zip Code		<input type="text" value="150.00"/>
46032		
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="375.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MR KEITH R JOHNSON 544		Date of Receipt
Mailing Address 4750 EVERGREEN AVE		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2013"/>
City	State	Transaction ID : SA11AI.114126
WISCONSIN RAPIDS	WI	Amount of Each Receipt this Period
Zip Code		<input type="text" value="50.00"/>
54494		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
SELF EMPLOYED	BUILDING CONTRACTOR	
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="275.00"/>
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 317 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR KEITH R JOHNSON 544
 Full Name (Last, First, Middle Initial)
 Mailing Address 4750 EVERGREEN AVE
 City WISCONSIN RAPIDS State WI Zip Code 54494
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation BUILDING CONTRACTOR
 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
 12 / 27 / 2013
Transaction ID : SA11AI.114124
 Amount of Each Receipt this Period
 50.00

B. MR DENNIS L JOHNSON 597
 Full Name (Last, First, Middle Initial)
 Mailing Address 1558 AMSTERDAM RD
 City BELGRADE State MT Zip Code 59714
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BIG SKY COIL LLC Occupation PRINCIPAL
 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
 12 / 03 / 2013
Transaction ID : SA11AI.114143
 Amount of Each Receipt this Period
 100.00

C. MR PAUL A JOHNSON 651
 Full Name (Last, First, Middle Initial)
 Mailing Address 2006 DAISY LN
 City JEFFERSON CTY State MO Zip Code 65109
 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 / 26 / 2013
Transaction ID : SA11AI.114171
 Amount of Each Receipt this Period
 100.00

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 318 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR DALE K JOHNSON 801
 Full Name (Last, First, Middle Initial)
 Mailing Address 6630 PERRY PARK BLVD
 City LARKSPUR State CO Zip Code 80118
 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 / 11 / 2013
Transaction ID : SA11AI.114241
 Amount of Each Receipt this Period
 250.00

B. MR EDWARD J JOHNSON 857
 Full Name (Last, First, Middle Initial)
 Mailing Address 5160 N SABINO FOOTHILLS DR
 City TUCSON State AZ Zip Code 85750
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INVEST COM REAL ESTATE Occupation SELF EMPLOYED
 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 / 2013
Transaction ID : SA11AI.114266
 Amount of Each Receipt this Period
 100.00

C. MR EDWARD J JOHNSON 857
 Full Name (Last, First, Middle Initial)
 Mailing Address 5160 N SABINO FOOTHILLS DR
 City TUCSON State AZ Zip Code 85750
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INVEST COM REAL ESTATE Occupation SELF EMPLOYED
 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
 10 / 02 / 2013
Transaction ID : SA11AI.114264
 Amount of Each Receipt this Period
 150.00

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: (check only one)	PAGE 319 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR EDWARD J JOHNSON 857
 Full Name (Last, First, Middle Initial)
 Mailing Address 5160 N SABINO FOOTHILLS DR
 City TUCSON State AZ Zip Code 85750
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INVEST COM REAL ESTATE Occupation SELF EMPLOYED
 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
 11 / 14 / 2013
Transaction ID : SA11AI.114265
 Amount of Each Receipt this Period
 50.00

B. MR EDWARD J JOHNSON 857
 Full Name (Last, First, Middle Initial)
 Mailing Address 5160 N SABINO FOOTHILLS DR
 City TUCSON State AZ Zip Code 85750
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INVEST COM REAL ESTATE Occupation SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 530.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2013
Transaction ID : SA11AI.114263
 Amount of Each Receipt this Period
 30.00

C. MS SHIRLEY C JOHNSON 939
 Full Name (Last, First, Middle Initial)
 Mailing Address 3230 MACOMBER DR
 City PEBBLE BEACH State CA Zip Code 93953
 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 / 19 / 2013
Transaction ID : SA11AI.114289
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	130.00
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 320 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS SHIRLEY C JOHNSON 939
 Full Name (Last, First, Middle Initial)
 Mailing Address 3230 MACOMBER DR
 City PEBBLE BEACH State CA Zip Code 93953
 Date of Receipt 08 / 27 / 2013
 Transaction ID : SA11AI.114290
 Amount of Each Receipt this Period 125.00
 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

B. MS SHIRLEY C JOHNSON 939
 Full Name (Last, First, Middle Initial)
 Mailing Address 3230 MACOMBER DR
 City PEBBLE BEACH State CA Zip Code 93953
 Date of Receipt 10 / 03 / 2013
 Transaction ID : SA11AI.114292
 Amount of Each Receipt this Period -125.00
 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

C. MS SHIRLEY C JOHNSON 939
 Full Name (Last, First, Middle Initial)
 Mailing Address 3230 MACOMBER DR
 City PEBBLE BEACH State CA Zip Code 93953
 Date of Receipt 10 / 07 / 2013
 Transaction ID : SA11AI.114293
 Amount of Each Receipt this Period 150.00
 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

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 321 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS SHIRLEY C JOHNSON 939
 Full Name (Last, First, Middle Initial)
 Mailing Address 3230 MACOMBER DR
 City PEBBLE BEACH State CA Zip Code 93953
 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
 10 / 28 / 2013
Transaction ID : SA11AI.114294
 Amount of Each Receipt this Period
 -150.00

B. MS SHIRLEY C JOHNSON 939
 Full Name (Last, First, Middle Initial)
 Mailing Address 3230 MACOMBER DR
 City PEBBLE BEACH State CA Zip Code 93953
 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
 11 / 27 / 2013
Transaction ID : SA11AI.114291
 Amount of Each Receipt this Period
 125.00

C. MS DOROTHY L JOHNSON 956
 Full Name (Last, First, Middle Initial)
 Mailing Address 2415 SHIRLAND PARK PL
 City AUBURN State CA Zip Code 95603
 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 / 05 / 2013
Transaction ID : SA11AI.114298
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	75.00
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 322 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. Paul Johnson 956			Date of Receipt
Mailing Address 6207 S Walnut St			<input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11AI.145205
Loomis	CA	95650	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		
Johnson & Co	Cpa		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="350.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MS SUSIE JOHNSTON 378			Date of Receipt
Mailing Address 303 S COLEMAN DR			<input type="text" value="09"/> / <input type="text" value="10"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11AI.114346
MARYVILLE	TN	37803	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="250.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. MR DANIEL H JOHNSTON 975			Date of Receipt
Mailing Address 333 MOUNTAIN VIEW DR UNIT 29			<input type="text" value="10"/> / <input type="text" value="09"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11AI.114365
TALENT	OR	97540	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="15.00"/>
Name of Employer	Occupation		
SELF EMPLOYED	REAL ESTATE APPRAISER		
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="315.00"/>
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 323 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR DANIEL H JOHNSTON 975
 Full Name (Last, First, Middle Initial)
 Mailing Address 333 MOUNTAIN VIEW DR UNIT 29
 City TALENT State OR Zip Code 97540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation REAL ESTATE APPRAISER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 14 / 2013
Transaction ID : SA11AI.114362
 Amount of Each Receipt this Period
 15.00

B. DR MARGARET K JONES 288 DMD
 Full Name (Last, First, Middle Initial)
 Mailing Address 3 INDIAN PL
 City ASHEVILLE State NC Zip Code 28805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 16 / 2013
Transaction ID : SA11AI.114435
 Amount of Each Receipt this Period
 100.00

C. MRS SHIRLEY W JONES 325
 Full Name (Last, First, Middle Initial)
 Mailing Address 8141 TABAID LN
 City PENSACOLA State FL Zip Code 32506
 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
 08 / 20 / 2013
Transaction ID : SA11AI.114458
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 140.00
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 324 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MRS SHIRLEY W JONES 325
 Full Name (Last, First, Middle Initial)
 Mailing Address 8141 TABAID LN
 City PENSACOLA State FL Zip Code 32506
 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
 M M / D D / Y Y Y Y Y
 10 / 21 / 2013
Transaction ID : SA11Al.114459
 Amount of Each Receipt this Period
 20.00

B. MRS SHIRLEY W JONES 325
 Full Name (Last, First, Middle Initial)
 Mailing Address 8141 TABAID LN
 City PENSACOLA State FL Zip Code 32506
 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 / D D / Y Y Y Y Y
 11 / 20 / 2013
Transaction ID : SA11Al.114460
 Amount of Each Receipt this Period
 20.00

C. MS EVELYN E JONES 350
 Full Name (Last, First, Middle Initial)
 Mailing Address 114 COUNTY ROAD 587
 City HANCEVILLE State AL Zip Code 35077
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BROOKWOOD MEDICAL CENTER Occupation HEALTHCARE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : SA11Al.114484
 Amount of Each Receipt this Period
 150.00

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: PAGE 325 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MRS JUNE W JONES 374
 Full Name (Last, First, Middle Initial)
 Mailing Address 1090 CONSTITUTION DR
 City CHATTANOOGA State TN Zip Code 37405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 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
 10 / 16 / 2013
Transaction ID : SA11AI.114497
 Amount of Each Receipt this Period
 100.00

B. MR HAROLD JONES 794
 Full Name (Last, First, Middle Initial)
 Mailing Address 1717 NORFOLK AVE
 APT 1323
 City LUBBOCK State TX Zip Code 79416
 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 / 22 / 2013
Transaction ID : SA11AI.114572
 Amount of Each Receipt this Period
 50.00

C. MS PAULINE B JONES 801
 Full Name (Last, First, Middle Initial)
 Mailing Address 3091 MILL VISTA RD
 UNIT 1013
 City LITTLETON State CO Zip Code 80129
 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
 12 / 11 / 2013
Transaction ID : SA11AI.114577
 Amount of Each Receipt this Period
 150.00

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 326 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS ELNORA JONES 934		Date of Receipt
Mailing Address PO BOX 22		<input type="text" value="12"/> / <input type="text" value="16"/> / <input type="text" value="2013"/>
City	State	Zip Code
SANTA MARGARITA	CA	93453
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.114595
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="275.00"/>	

Full Name (Last, First, Middle Initial) B. MR EUGENE JONES 979		Date of Receipt
Mailing Address PO BOX 657		<input type="text" value="07"/> / <input type="text" value="08"/> / <input type="text" value="2013"/>
City	State	Zip Code
ONTARIO	OR	97914
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.114611
Name of Employer	Occupation	Amount of Each Receipt this Period
FIRECON	SALES	<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 EUGENE JONES 979		Date of Receipt
Mailing Address PO BOX 657		<input type="text" value="12"/> / <input type="text" value="04"/> / <input type="text" value="2013"/>
City	State	Zip Code
ONTARIO	OR	97914
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.114612
Name of Employer	Occupation	Amount of Each Receipt this Period
FIRECON	SALES	<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="400.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="300.00"/>
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 327 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MRS MARILYN JORDAN 276
 Full Name (Last, First, Middle Initial)
 Mailing Address 10527 DAPPING DR
 City RALEIGH State NC Zip Code 27614
 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 / 03 / 2013
Transaction ID : SA11AI.114629
 Amount of Each Receipt this Period
 50.00

B. MR ROBERT M JOURDAN 601
 Full Name (Last, First, Middle Initial)
 Mailing Address 22W301 AHLSTRAND RD
 City GLEN ELLYN State IL Zip Code 60137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation DENTIST
 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
 11 / 18 / 2013
Transaction ID : SA11AI.114690
 Amount of Each Receipt this Period
 25.00

C. MS JULIE ANN JUSTICE 840
 Full Name (Last, First, Middle Initial)
 Mailing Address 3120 S 4000 E
 City VERNAL State UT Zip Code 84078
 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 ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 12 / 2013
Transaction ID : SA11AI.114792
 Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
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 328 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS JULIE ANN JUSTICE 840		Date of Receipt
Mailing Address 3120 S 4000 E		<input type="text" value="10"/> / <input type="text" value="14"/> / <input type="text" value="2013"/>
City State Zip Code VERNAL UT 84078		Transaction ID : SA11AI.114793
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="150.00"/>
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 ▼ <input type="text" value="600.00"/>	

Full Name (Last, First, Middle Initial) B. MR DAVID A KAHL 432		Date of Receipt
Mailing Address 1240 NEWBURY DR		<input type="text" value="10"/> / <input type="text" value="09"/> / <input type="text" value="2013"/>
City State Zip Code COLUMBUS OH 43229		Transaction ID : SA11AI.114828
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="50.00"/>
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) C. MR ARNO G KALB 349		Date of Receipt
Mailing Address 5080 SE HANSON CIR		<input type="text" value="10"/> / <input type="text" value="01"/> / <input type="text" value="2013"/>
City State Zip Code STUART FL 34997		Transaction ID : SA11AI.114866
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="50.00"/>
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="600.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="250.00"/>
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: <input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
	PAGE 329 OF 724								

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR ARNO G KALB 349
 Full Name (Last, First, Middle Initial)
 Mailing Address 5080 SE HANSON CIR
 City STUART State FL Zip Code 34997
 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 ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2013
Transaction ID : SA11Al.114865
 Amount of Each Receipt this Period
 100.00

B. MRS SABINA KALINOWSKI 495
 Full Name (Last, First, Middle Initial)
 Mailing Address 2034 TALL MEADOW ST NE
 City GRAND RAPIDS State MI Zip Code 49505
 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
 09 / 16 / 2013
Transaction ID : SA11Al.114883
 Amount of Each Receipt this Period
 35.00

C. MR HOWARD KAPP 631
 Full Name (Last, First, Middle Initial)
 Mailing Address 6300 NORTHWOOD AVE
 APT 3W
 City SAINT LOUIS State MO Zip Code 63105
 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
 12 / 06 / 2013
Transaction ID : SA11Al.114950
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	160.00
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 330 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR ROBERT F KARNES 638
 Full Name (Last, First, Middle Initial)
 Mailing Address 223 N HANDY ST
 City SIKESTON State MO Zip Code 63801
 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 ▼ 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2013
Transaction ID : SA11AI.114984
 Amount of Each Receipt this Period
 150.00

B. MS D C KEENAN 638
 Full Name (Last, First, Middle Initial)
 Mailing Address 603 W LINDENWOOD AVE
 City SIKESTON State MO Zip Code 63801
 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
 09 / 06 / 2013
Transaction ID : SA11AI.115135
 Amount of Each Receipt this Period
 75.00

C. MS D C KEENAN 638
 Full Name (Last, First, Middle Initial)
 Mailing Address 603 W LINDENWOOD AVE
 City SIKESTON State MO Zip Code 63801
 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 / 16 / 2013
Transaction ID : SA11AI.115133
 Amount of Each Receipt this Period
 30.00

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 331 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

A. MS D C KEENAN 638
Full Name (Last, First, Middle Initial)

Mailing Address 603 W LINDENWOOD AVE

City SIKESTON State MO Zip Code 63801

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 ▼
295.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2013
Transaction ID : SA11AI.115134

Amount of Each Receipt this Period
 30.00

B. MR CHARLES KEETON 491
Full Name (Last, First, Middle Initial)

Mailing Address 2423 DICK ST
LOT 1

City NILES State MI Zip Code 49120

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

Name of Employer NONE Occupation UNEMPLOYED

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
 10 / 16 / 2013
Transaction ID : SA11AI.115148

Amount of Each Receipt this Period
 40.00

C. MS HELEN L KEITH 852
Full Name (Last, First, Middle Initial)

Mailing Address 1144 E BLUEBELL LN

City TEMPE State AZ Zip Code 85281

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 / 19 / 2013
Transaction ID : SA11AI.115186

Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 170.00

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 332 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS HELEN L KEITH 852
 Full Name (Last, First, Middle Initial)
 Mailing Address 1144 E BLUEBELL LN
 City TEMPE State AZ Zip Code 85281
 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
 10 / 07 / 2013
Transaction ID : SA11Al.115183
 Amount of Each Receipt this Period
 35.00

B. MS HELEN L KEITH 852
 Full Name (Last, First, Middle Initial)
 Mailing Address 1144 E BLUEBELL LN
 City TEMPE State AZ Zip Code 85281
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2013
Transaction ID : SA11Al.115184
 Amount of Each Receipt this Period
 75.00

C. MS ROSEMARY JONES KELLER 770
 Full Name (Last, First, Middle Initial)
 Mailing Address 102 SUGARBERRY CIR
 City HOUSTON State TX Zip Code 77024
 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 / 12 / 2013
Transaction ID : SA11Al.115218
 Amount of Each Receipt this Period
 300.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 410.00
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 333 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS ROSEMARY JONES KELLER 770
 Full Name (Last, First, Middle Initial)
 Mailing Address 102 SUGARBERRY CIR
 City HOUSTON State TX Zip Code 77024
 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 ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2013
Transaction ID : SA11AI.115219
 Amount of Each Receipt this Period
 50.00

B. MS CATHERINE KELLEY 773
 Full Name (Last, First, Middle Initial)
 Mailing Address 175 FOREST HEIGHTS LN
 City MONTGOMERY State TX Zip Code 77316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TEXAS HOMETOWN REALTY Occupation REALTOR
 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 / 06 / 2013
Transaction ID : SA11AI.115253
 Amount of Each Receipt this Period
 150.00

C. MR RALPH J KELSEY 128
 Full Name (Last, First, Middle Initial)
 Mailing Address 132 FARR LN
 City QUEENSBURY State NY Zip Code 12804
 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
 10 / 14 / 2013
Transaction ID : SA11AI.115305
 Amount of Each Receipt this Period
 200.00

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 334 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR ROBERT E KELSEY 920
 Full Name (Last, First, Middle Initial)
 Mailing Address 7758 MADRILENA WAY
 City CARLSBAD State CA Zip Code 92009
 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 / 16 / 2013
Transaction ID : SA11AI.115309
 Amount of Each Receipt this Period
 200.00

B. MS DIANE KENEFICK 773
 Full Name (Last, First, Middle Initial)
 Mailing Address 11723 CANYON MIST LN
 City TOMBALL State TX Zip Code 77377
 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 / 18 / 2013
Transaction ID : SA11AI.115361
 Amount of Each Receipt this Period
 50.00

C. MRS DIAN KENNEDY 913
 Full Name (Last, First, Middle Initial)
 Mailing Address 5906 ETIWANDA AVE
 UNIT 27
 City TARZANA State CA Zip Code 91356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DK LANDSCAPE DESIGNS Occupation LANDSCAPER
 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 / 20 / 2013
Transaction ID : SA11AI.115385
 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 335 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MRS DIAN KENNEDY 913
 Full Name (Last, First, Middle Initial)
 Mailing Address 5906 ETIWANDA AVE
 UNIT 27
 City State Zip Code
 TARZANA CA 91356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 DK LANDSCAPE DESIGNS LANDSCAPER
 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
 12 / 20 / 2013
Transaction ID : SA11AI.115383
 Amount of Each Receipt this Period
 150.00

B. MRS MARILYN L KENTCH 993
 Full Name (Last, First, Middle Initial)
 Mailing Address 2231 GARDENA RD
 City State Zip Code
 TOUCHET WA 99360
 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 / 30 / 2013
Transaction ID : SA11AI.115408
 Amount of Each Receipt this Period
 50.00

C. MRS MARILYN L KENTCH 993
 Full Name (Last, First, Middle Initial)
 Mailing Address 2231 GARDENA RD
 City State Zip Code
 TOUCHET WA 99360
 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 ▼
 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 30 / 2013
Transaction ID : SA11AI.115409
 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 336 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS MAXINE R KERKESLAGER 170
 Full Name (Last, First, Middle Initial)
 Mailing Address 125 CAMP MEETING RD
 City JONESTOWN State PA Zip Code 17038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation BOOKKEEPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 19 / 2013
Transaction ID : SA11AI.115432
 Amount of Each Receipt this Period 100.00

B. MR PHILIP E KERSEY 231
 Full Name (Last, First, Middle Initial)
 Mailing Address 8120 TAVERN KEEPERS WAY
 City MECHANICSVLLE State VA Zip Code 23111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer IN DEPENDANT CONTRACTOR Occupation SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 03 / 2013
Transaction ID : SA11AI.115486
 Amount of Each Receipt this Period 150.00

C. MR HAROLD S KERZNER 076
 Full Name (Last, First, Middle Initial)
 Mailing Address 530 FAIRVIEW AVE APT 301
 City WESTWOOD State NJ Zip Code 07675
 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 11 / 21 / 2013
Transaction ID : SA11AI.115494
 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: (check only one)	PAGE 337 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS PRUDENCE B KESTNER 217
 Full Name (Last, First, Middle Initial)
 Mailing Address 15 FAIRVIEW AVE
 City FREDERICK State MD Zip Code 21701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 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
 10 / 07 / 2013
Transaction ID : SA11AI.115507
 Amount of Each Receipt this Period
 150.00

B. MS WILLA KEY 850
 Full Name (Last, First, Middle Initial)
 Mailing Address 101 W BECK LN
 City PHOENIX State AZ Zip Code 85023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation REAL ESTATE BROKER
 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
 10 / 14 / 2013
Transaction ID : SA11AI.115522
 Amount of Each Receipt this Period
 100.00

C. MS SALLY R KIEFFER 598
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 42
 City DARBY State MT Zip Code 59829
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MONTANA TEA PARTY Occupation CO-FOUNDER
 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 / 12 / 2013
Transaction ID : SA11AI.115549
 Amount of Each Receipt this Period
 100.00

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: PAGE 338 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS SALLY R KIEFFER 598
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 42
 City DARBY State MT Zip Code 59829
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MONTANA TEA PARTY Occupation CO-FOUNDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 28 / 2013
Transaction ID : SA11AI.115551
 Amount of Each Receipt this Period
 100.00

B. MS SALLY R KIEFFER 598
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 42
 City DARBY State MT Zip Code 59829
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MONTANA TEA PARTY Occupation CO-FOUNDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 14 / 2013
Transaction ID : SA11AI.115550
 Amount of Each Receipt this Period
 100.00

C. MRS DAVID KIMBELL 763
 Full Name (Last, First, Middle Initial)
 Mailing Address 4211 LAKE PARK DR
 City WICHITA FALLS State TX Zip Code 76302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BURK ROYALTY CO LTD Occupation PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 10 / 2013
Transaction ID : SA11AI.115605
 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 339 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MRS FRANCES E KING 439
 Full Name (Last, First, Middle Initial)
 Mailing Address 599 BRAYBARTON BLVD
 City STEUBENVILLE State OH Zip Code 43952
 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 / 18 / 2013
Transaction ID : SA11AI.115682
 Amount of Each Receipt this Period
 25.00

B. MRS FRANCES E KING 439
 Full Name (Last, First, Middle Initial)
 Mailing Address 599 BRAYBARTON BLVD
 City STEUBENVILLE State OH Zip Code 43952
 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 ▼ 410.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2013
Transaction ID : SA11AI.115679
 Amount of Each Receipt this Period
 50.00

C. MS MARIE K KITAJIMA 943
 Full Name (Last, First, Middle Initial)
 Mailing Address 2599 WAVERLEY ST.
 City PALO ALTO State CA Zip Code 94301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 30 / 2013
Transaction ID : SA11AI.115867
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
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 340 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS MARIE K KITAJIMA 943
 Full Name (Last, First, Middle Initial)
 Mailing Address 2599 WAVERLEY ST.
 City PALO ALTO State CA Zip Code 94301
 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
 08 / 22 / 2013
Transaction ID : SA11AI.115869
 Amount of Each Receipt this Period
 100.00

B. MS MARIE K KITAJIMA 943
 Full Name (Last, First, Middle Initial)
 Mailing Address 2599 WAVERLEY ST.
 City PALO ALTO State CA Zip Code 94301
 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 ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 18 / 2013
Transaction ID : SA11AI.115868
 Amount of Each Receipt this Period
 100.00

C. MR THOMAS W KITZMILLER 380
 Full Name (Last, First, Middle Initial)
 Mailing Address 491 GROUNDHOG RD
 City HALLS State TN Zip Code 38040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 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
 07 / 16 / 2013
Transaction ID : SA11AI.115890
 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 341 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR THOMAS W KITZMILLER 380
 Full Name (Last, First, Middle Initial)
 Mailing Address 491 GROUNDHOG RD
 City HALLS State TN Zip Code 38040
 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
 08 / 28 / 2013
Transaction ID : SA11AI.115891
 Amount of Each Receipt this Period
 100.00

B. MS SANDRA KLANG 940
 Full Name (Last, First, Middle Initial)
 Mailing Address 3104 CANANEA AVE
 City BURLINGAME State CA Zip Code 94010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Klang Business Services Ceo
 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
 10 / 10 / 2013
Transaction ID : SA11AI.145400
 Amount of Each Receipt this Period
 100.00

C. MR JAMES KLINGLER 730
 Full Name (Last, First, Middle Initial)
 Mailing Address 5106 NORTH BEAVER AVE
 City BETHANY State OK Zip Code 73008
 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 / 30 / 2013
Transaction ID : SA11AI.115991
 Amount of Each Receipt this Period
 500.00

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 342 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR JAMES W KLINGLER 730		Date of Receipt
Mailing Address 5106 N BEAVER AVE		<input type="text" value="08"/> / <input type="text" value="21"/> / <input type="text" value="2013"/>
City	State	Zip Code
BETHANY	OK	73008
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.115989
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="1500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="2000.00"/>	

Full Name (Last, First, Middle Initial) B. MR JAMES W KLINGLER 730		Date of Receipt
Mailing Address 5106 N BEAVER AVE		<input type="text" value="08"/> / <input type="text" value="26"/> / <input type="text" value="2013"/>
City	State	Zip Code
BETHANY	OK	73008
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.115992
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="3000.00"/>	

Full Name (Last, First, Middle Initial) C. MR JAMES W KLINGLER 730		Date of Receipt
Mailing Address 5106 N BEAVER AVE		<input type="text" value="11"/> / <input type="text" value="19"/> / <input type="text" value="2013"/>
City	State	Zip Code
BETHANY	OK	73008
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.115993
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="1500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="4500.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="4000.00"/>
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 343 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR GEORGE R KLOSSING 382		Date of Receipt
Mailing Address 69 KLOSSING DR		<input type="text" value="09"/> / <input type="text" value="10"/> / <input type="text" value="2013"/>
City	State	Zip Code
PARIS	TN	38242
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.116030
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
GUN DEALER	SELF EMPLOYED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="225.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MR GARY KLUCK 956		Date of Receipt
Mailing Address 8650 INDIAN HILL CT		<input type="text" value="11"/> / <input type="text" value="06"/> / <input type="text" value="2013"/>
City	State	Zip Code
ORANGEVALE	CA	95662
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.116037
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
QUALITY FIRST HOME IMPROVEMENT	CEO	
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) ▼		

Full Name (Last, First, Middle Initial) C. MS IVY J KNIGHT 180		Date of Receipt
Mailing Address PO BOX 42		<input type="text" value="07"/> / <input type="text" value="15"/> / <input type="text" value="2013"/>
City	State	Zip Code
NEW TRIPOLI	PA	18066
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.116097
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<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="205.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="250.00"/>
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 344 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS IVY J KNIGHT 180
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 42
 City NEW TRIPOLI State PA Zip Code 18066
 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 ▼ 305.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 22 / 2013
Transaction ID : SA11Al.116095
 Amount of Each Receipt this Period
 100.00

B. MS IVY J KNIGHT 180
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 42
 City NEW TRIPOLI State PA Zip Code 18066
 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 ▼ 355.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2013
Transaction ID : SA11Al.116094
 Amount of Each Receipt this Period
 50.00

C. MR KENNETH J KNOWLES 358
 Full Name (Last, First, Middle Initial)
 Mailing Address 12000 TURNMEYER DR SE APT 1132
 City HUNTSVILLE State AL Zip Code 35803
 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 ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2013
Transaction ID : SA11Al.116149
 Amount of Each Receipt this Period
 100.00

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 345 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR KENNETH J KNOWLES 358		Date of Receipt
Mailing Address 12000 TURNMEYER DR SE APT 1132		<input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2013"/>
City	State	Transaction ID : SA11Al.116148
HUNTSVILLE	AL	Amount of Each Receipt this Period
Zip Code		<input type="text" value="100.00"/>
35803		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
NONE	NOT EMPLOYED	
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) B. MS SHIRLEY KNOX 292		Date of Receipt
Mailing Address 4633 CARTER HILL DR		<input type="text" value="08"/> / <input type="text" value="12"/> / <input type="text" value="2013"/>
City	State	Transaction ID : SA11Al.116158
COLUMBIA	SC	Amount of Each Receipt this Period
Zip Code		<input type="text" value="200.00"/>
29206		
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="650.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MS SHIRLEY KNOX 292		Date of Receipt
Mailing Address 4633 CARTER HILL DR		<input type="text" value="09"/> / <input type="text" value="12"/> / <input type="text" value="2013"/>
City	State	Transaction ID : SA11Al.116161
COLUMBIA	SC	Amount of Each Receipt this Period
Zip Code		<input type="text" value="100.00"/>
29206		
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="750.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="400.00"/>
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 346 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS JEAN O KOCH 056
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 1000
 City WAITSFIELD State VT Zip Code 05673
 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
 12 / 30 / 2013
Transaction ID : SA11AI.116195
 Amount of Each Receipt this Period
 250.00

B. MR LOUIS C KOLAR 895
 Full Name (Last, First, Middle Initial)
 Mailing Address 14420 E WINDRIVER LN
 City RENO State NV Zip Code 89511
 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 / 2013
Transaction ID : SA11AI.116308
 Amount of Each Receipt this Period
 200.00

C. MR LOUIS C KOLAR 895
 Full Name (Last, First, Middle Initial)
 Mailing Address 14420 E WINDRIVER LN
 City RENO State NV Zip Code 89511
 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
 08 / 27 / 2013
Transaction ID : SA11AI.116307
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	475.00
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 347 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR LOUIS C KOLAR 895
 Full Name (Last, First, Middle Initial)
 Mailing Address 14420 E WINDRIVER LN
 City RENO State NV Zip Code 89511
 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 ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 15 / 2013
Transaction ID : SA11AI.116309
 Amount of Each Receipt this Period
 200.00

B. MS IVA KOLSTAD 594
 Full Name (Last, First, Middle Initial)
 Mailing Address 297 MT HIGHWAY 366
 City LEDGER State MT Zip Code 59456
 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 / 08 / 2013
Transaction ID : SA11AI.116336
 Amount of Each Receipt this Period
 50.00

C. MS CHARLOTTE J KOLZOW 977
 Full Name (Last, First, Middle Initial)
 Mailing Address 60622 TETON CT
 City BEND State OR Zip Code 97702
 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
 12 / 19 / 2013
Transaction ID : SA11AI.116339
 Amount of Each Receipt this Period
 200.00

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 348 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS VALERIE W KORTH 331
 Full Name (Last, First, Middle Initial)
 Mailing Address 6363 SW 109TH ST
 City MIAMI State FL Zip Code 33156
 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
 08 / 27 / 2013
Transaction ID : SA11Al.116399
 Amount of Each Receipt this Period
 100.00

B. MS VALERIE W KORTH 331
 Full Name (Last, First, Middle Initial)
 Mailing Address 6363 SW 109TH ST
 City MIAMI State FL Zip Code 33156
 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
 09 / 20 / 2013
Transaction ID : SA11Al.116400
 Amount of Each Receipt this Period
 50.00

C. MS MARIANNE R KRAFT 973
 Full Name (Last, First, Middle Initial)
 Mailing Address 8644 WARNER DR SE
 City SALEM State OR Zip Code 97317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CONTRACTOR CONSTRUCTION CO Occupation ADMINISTRATOR
 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
 11 / 04 / 2013
Transaction ID : SA11Al.116516
 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 349 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR STEPHEN KRAVITS 156		Date of Receipt MM / DD / YYYY 09 / 20 / 2013 Transaction ID : SA11AI.116597
Mailing Address PO BOX 25		Amount of Each Receipt this Period 175.00
City JONES MILLS	State PA	Zip Code 15646
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 ▼ 525.00	

Full Name (Last, First, Middle Initial) B. MR KEVIN KRUEGER 544		Date of Receipt MM / DD / YYYY 07 / 26 / 2013 Transaction ID : SA11AI.116693
Mailing Address 14758 NAUGART DR		Amount of Each Receipt this Period 450.00
City ATHENS	State WI	Zip Code 54411
FEC ID number of contributing federal political committee. C	Name of Employer MERRILL AREA SCHOOL DISTRICT	Occupation EDUCATOR
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

Full Name (Last, First, Middle Initial) C. MR KEVIN KRUEGER 544		Date of Receipt MM / DD / YYYY 10 / 07 / 2013 Transaction ID : SA11AI.116696
Mailing Address 14758 NAUGART DR		Amount of Each Receipt this Period 100.00
City ATHENS	State WI	Zip Code 54411
FEC ID number of contributing federal political committee. C	Name of Employer MERRILL AREA SCHOOL DISTRICT	Occupation EDUCATOR
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	

SUBTOTAL of Receipts This Page (optional).....▶	725.00
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 350 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR KEVIN KRUEGER 544
 Full Name (Last, First, Middle Initial)
 Mailing Address 14758 NAUGART DR
 City ATHENS State WI Zip Code 54411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MERRILL AREA SCHOOL DISTRICT Occupation EDUCATOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1750.00**

Date of Receipt **10 / 28 / 2013**
Transaction ID : SA11Al.116697
 Amount of Each Receipt this Period **450.00**

B. MR KEVIN KRUEGER 544
 Full Name (Last, First, Middle Initial)
 Mailing Address 14758 NAUGART DR
 City ATHENS State WI Zip Code 54411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MERRILL AREA SCHOOL DISTRICT Occupation EDUCATOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1850.00**

Date of Receipt **12 / 20 / 2013**
Transaction ID : SA11Al.116694
 Amount of Each Receipt this Period **100.00**

C. MS LILLIAN I KRUEGER 544
 Full Name (Last, First, Middle Initial)
 Mailing Address 6756 N 72ND AVE
 City WAUSAU State WI Zip Code 54401
 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 / 18 / 2013**
Transaction ID : SA11Al.116692
 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 351 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS LILLIAN I KRUEGER 544
 Full Name (Last, First, Middle Initial)
 Mailing Address 6756 N 72ND AVE
 City WAUSAU State WI Zip Code 54401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2013
Transaction ID : SA11Al.116699
 Amount of Each Receipt this Period
 100.00

B. MS LILLIAN I KRUEGER 544
 Full Name (Last, First, Middle Initial)
 Mailing Address 6756 N 72ND AVE
 City WAUSAU State WI Zip Code 54401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 11 / 2013
Transaction ID : SA11Al.116698
 Amount of Each Receipt this Period
 150.00

C. MS LILLIAN I KRUEGER 544
 Full Name (Last, First, Middle Initial)
 Mailing Address 6756 N 72ND AVE
 City WAUSAU State WI Zip Code 54401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 18 / 2013
Transaction ID : SA11Al.116695
 Amount of Each Receipt this Period
 100.00

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: PAGE 352 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR DEAN A KRUMPELMANN 218
 Full Name (Last, First, Middle Initial)
 Mailing Address 140 NENTEGO DR
 City State Zip Code
 FRUITLAND MD 21826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MERCHANDISER SALES
 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
 11 / 25 / 2013
Transaction ID : SA11Al.116718
 Amount of Each Receipt this Period
 75.00

B. MS ANNE E KUCKLICK 950
 Full Name (Last, First, Middle Initial)
 Mailing Address 22700 MIDPINE CT
 City State Zip Code
 LOS GATOS CA 95033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE HOMEMAKER
 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 / 08 / 2013
Transaction ID : SA11Al.116764
 Amount of Each Receipt this Period
 100.00

C. MS ANNE E KUCKLICK 950
 Full Name (Last, First, Middle Initial)
 Mailing Address 22700 MIDPINE CT
 City State Zip Code
 LOS GATOS CA 95033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE HOMEMAKER
 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
 10 / 08 / 2013
Transaction ID : SA11Al.116765
 Amount of Each Receipt this Period
 100.00

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 353 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS ALICE KUEHLER 790			Date of Receipt
Mailing Address PO BOX 574			<input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11Al.116767
GROOM	TX	79039	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		
KUEHLER FARMS	FARMER		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="225.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MR MAX KUHN 456			Date of Receipt
Mailing Address PO BOX 501			<input type="text" value="07"/> / <input type="text" value="10"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11Al.116795
WELLSTON	OH	45692	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) C. MR MAX KUHN 456			Date of Receipt
Mailing Address PO BOX 501			<input type="text" value="08"/> / <input type="text" value="16"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11Al.116796
WELLSTON	OH	45692	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) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="250.00"/>
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 354 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR THOMAS M KUZMICH 797
 Full Name (Last, First, Middle Initial)
 Mailing Address 406 N MAIN ST
 City MIDLAND State TX Zip Code 79701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GO TECH Occupation TECHNICIAN
 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
 10 / 04 / 2013
Transaction ID : SA11AI.116886
 Amount of Each Receipt this Period
 175.00

B. VADEN LACKEY 372
 Full Name (Last, First, Middle Initial)
 Mailing Address 104 CLARENDON AVE
 City NASHVILLE State TN Zip Code 37205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ADDAMS & REESE LLP Occupation ATTORNEY
 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 / 2013
Transaction ID : SA11AI.116955
 Amount of Each Receipt this Period
 100.00

C. MR GARY LACONIS 773
 Full Name (Last, First, Middle Initial)
 Mailing Address 1500 MAGNOLIA LN
 City KINGWOOD State TX Zip Code 77339
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GARY LACONIS MACHINERY BROKER Occupation OWNER
 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
 10 / 07 / 2013
Transaction ID : SA11AI.116959
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	525.00
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 355 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

A. MS MARY E LAFORET 486
 Full Name (Last, First, Middle Initial)
 Mailing Address 112 HIDDEN STONE CT
 City MIDLAND State MI Zip Code 48640
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ACN PRODUCTS Occupation INDEPENDENT REPRESENTATIVE
 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 / 27 / 2013
Transaction ID : SA11AI.116998
 Amount of Each Receipt this Period
 100.00

B. MS MARY E LAFORET 486
 Full Name (Last, First, Middle Initial)
 Mailing Address 112 HIDDEN STONE CT
 City MIDLAND State MI Zip Code 48640
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ACN PRODUCTS Occupation INDEPENDENT REPRESENTATIVE
 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
 11 / 27 / 2013
Transaction ID : SA11AI.116999
 Amount of Each Receipt this Period
 100.00

C. MS ELLA LAKE 670
 Full Name (Last, First, Middle Initial)
 Mailing Address 200 N LOCUST ST
 City LAKE CITY State KS Zip Code 67071
 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
 12 / 30 / 2013
Transaction ID : SA11AI.117048
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	225.00
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 356 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS CHARLOTTE M LAMBERT 570
 Full Name (Last, First, Middle Initial)
 Mailing Address 120 SYCAMORE AVE
 APT 24
 City VERMILLION State SD Zip Code 57069
 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
 11 / 22 / 2013
Transaction ID : SA11AI.117091
 Amount of Each Receipt this Period
 200.00

B. MS MARGIE I LAMFERS 923
 Full Name (Last, First, Middle Initial)
 Mailing Address 11526 3RD AVE
 City HESPERIA State CA Zip Code 92345
 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
 10 / 21 / 2013
Transaction ID : SA11AI.117116
 Amount of Each Receipt this Period
 40.00

C. MS MARGIE I LAMFERS 923
 Full Name (Last, First, Middle Initial)
 Mailing Address 11526 3RD AVE
 City HESPERIA State CA Zip Code 92345
 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
 11 / 04 / 2013
Transaction ID : SA11AI.117118
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 260.00
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 357 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS MARGIE I LAMFERS 923
 Full Name (Last, First, Middle Initial)
 Mailing Address 11526 3RD AVE
 City HESPERIA State CA Zip Code 92345
 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
 12 / 11 / 2013
Transaction ID : SA11AI.117117
 Amount of Each Receipt this Period
 200.00

B. MS STACY L LANCASTER 717
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 214
 City HAMPTON State AR Zip Code 71744
 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 / 22 / 2013
Transaction ID : SA11AI.117158
 Amount of Each Receipt this Period
 100.00

C. MS STACY L LANCASTER 717
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 214
 City HAMPTON State AR Zip Code 71744
 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
 10 / 22 / 2013
Transaction ID : SA11AI.117159
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 220.00
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 358 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS KARLA LANDRY 705
 Full Name (Last, First, Middle Initial)
 Mailing Address 108 E LAWRENCE ST
 City NEW IBERIA State LA Zip Code 70563
 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 ▼ 325.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 19 / 2013
Transaction ID : SA11AI.117217
 Amount of Each Receipt this Period
 25.00

B. MS KARLA LANDRY 705
 Full Name (Last, First, Middle Initial)
 Mailing Address 108 E LAWRENCE ST
 City NEW IBERIA State LA Zip Code 70563
 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 ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 28 / 2013
Transaction ID : SA11AI.117218
 Amount of Each Receipt this Period
 25.00

C. MS LINDSAY C LANE 218
 Full Name (Last, First, Middle Initial)
 Mailing Address 297 BEAVER DAM DR
 City SALISBURY State MD Zip Code 21804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation REGISTERED NURSE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 21 / 2013
Transaction ID : SA11AI.117230
 Amount of Each Receipt this Period
 100.00

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: PAGE 359 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS LINDSAY C LANE 218
 Full Name (Last, First, Middle Initial)
 Mailing Address 297 BEAVER DAM DR
 City SALISBURY State MD Zip Code 21804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation REGISTERED NURSE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 14 / 2013
Transaction ID : SA11AI.117231
 Amount of Each Receipt this Period
 75.00

B. MS MARGUERITE LANGLEY 939
 Full Name (Last, First, Middle Initial)
 Mailing Address 171 LITTLEFIELD RD
 City MONTEREY State CA Zip Code 93940
 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
 11 / 11 / 2013
Transaction ID : SA11AI.117320
 Amount of Each Receipt this Period
 100.00

C. MR STEPHEN LANKHEIT 638
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 128
 City CHARLESTON State MO Zip Code 63834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 23 / 2013
Transaction ID : SA11AI.117346
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
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 360 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR STEPHEN LANKHEIT 638
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 128
 City CHARLESTON State MO Zip Code 63834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 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
 12 / 11 / 2013
Transaction ID : SA11AI.117348
 Amount of Each Receipt this Period
 25.00

B. MRS RICHARD LARSEN 974
 Full Name (Last, First, Middle Initial)
 Mailing Address 83014 TERRITORIAL HWY
 City EUGENE State OR Zip Code 97405
 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 ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 15 / 2013
Transaction ID : SA11AI.117446
 Amount of Each Receipt this Period
 100.00

C. MS MARY B LARSEN 989
 Full Name (Last, First, Middle Initial)
 Mailing Address 605 BROADWAY
 City GRANDVIEW State WA Zip Code 98930
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation FINANCIAL SYSTEMS TRAINING
 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
 07 / 22 / 2013
Transaction ID : SA11AI.117447
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 145.00
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 361 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS MARY B LARSEN 989		Date of Receipt
Mailing Address 605 BROADWAY		<input type="text" value="08"/> / <input type="text" value="05"/> / <input type="text" value="2013"/>
City	State	Zip Code
GRANDVIEW	WA	98930
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
SELF EMPLOYED	FINANCIAL SYSTEMS TRAINING	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="270.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>

Full Name (Last, First, Middle Initial) B. MS MARY B LARSEN 989		Date of Receipt
Mailing Address 605 BROADWAY		<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2013"/>
City	State	Zip Code
GRANDVIEW	WA	98930
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
SELF EMPLOYED	FINANCIAL SYSTEMS TRAINING	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="320.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>

Full Name (Last, First, Middle Initial) C. MS BARBARA LASHORNE 600		Date of Receipt
Mailing Address 1043 WHITE MTN DR		<input type="text" value="07"/> / <input type="text" value="02"/> / <input type="text" value="2013"/>
City	State	Zip Code
NORTHBROOK	IL	60062
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
CAREGIVER	VOLUNTEER	
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="100.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="200.00"/>
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 362 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS BARBARA LASHORNE 600		Date of Receipt
Mailing Address 1043 WHITE MTN DR		<input type="text" value="09"/> / <input type="text" value="18"/> / <input type="text" value="2013"/>
City	State	Zip Code
NORTHBROOK	IL	60062
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.117513
Name of Employer	Occupation	Amount of Each Receipt this Period
CAREGIVER	VOLUNTEER	<input type="text" value="50.00"/>
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"/>	

Full Name (Last, First, Middle Initial) B. MS BARBARA LASHORNE 600		Date of Receipt
Mailing Address 1043 WHITE MTN DR		<input type="text" value="11"/> / <input type="text" value="11"/> / <input type="text" value="2013"/>
City	State	Zip Code
NORTHBROOK	IL	60062
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.117512
Name of Employer	Occupation	Amount of Each Receipt this Period
CAREGIVER	VOLUNTEER	<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="450.00"/>	

Full Name (Last, First, Middle Initial) C. MS SHIRLEY L LAURIN 483		Date of Receipt
Mailing Address 24583 MILLCREEK DR		<input type="text" value="07"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>
City	State	Zip Code
FARMINGTON HILLS	MI	48336
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.117576
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="150.00"/>
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"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="300.00"/>
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 363 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS SHIRLEY L LAURIN 483
 Full Name (Last, First, Middle Initial)
 Mailing Address 24583 MILLCREEK DR
 City FARMINGTON HILLS State MI Zip Code 48336
 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
 10 / 16 / 2013
Transaction ID : SA11AI.117577
 Amount of Each Receipt this Period
 150.00

B. MR WILLIAM LAWRENCE 462
 Full Name (Last, First, Middle Initial)
 Mailing Address 11114 LINCOLN TRL
 City INDIANAPOLIS State IN Zip Code 46236
 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 ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 24 / 2013
Transaction ID : SA11AI.117621
 Amount of Each Receipt this Period
 25.00

C. REEDA C LAWRENCE 780
 Full Name (Last, First, Middle Initial)
 Mailing Address 1652 FM 2790
 City LYTLE State TX Zip Code 78052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PUBLIC EDUCATION Occupation 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
 09 / 03 / 2013
Transaction ID : SA11AI.117646
 Amount of Each Receipt this Period
 100.00

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: PAGE 364 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. REEDA C LAWRENCE 780
 Full Name (Last, First, Middle Initial)
 Mailing Address 1652 FM 2790
 City LYTLE State TX Zip Code 78052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PUBLIC EDUCATION Occupation TEACHER
 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
 10 / 16 / 2013
Transaction ID : SA11AI.117644
 Amount of Each Receipt this Period
 25.00

B. REEDA C LAWRENCE 780
 Full Name (Last, First, Middle Initial)
 Mailing Address 1652 FM 2790
 City LYTLE State TX Zip Code 78052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PUBLIC EDUCATION Occupation TEACHER
 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
 10 / 22 / 2013
Transaction ID : SA11AI.117643
 Amount of Each Receipt this Period
 25.00

C. REEDA C LAWRENCE 780
 Full Name (Last, First, Middle Initial)
 Mailing Address 1652 FM 2790
 City LYTLE State TX Zip Code 78052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PUBLIC EDUCATION Occupation 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
 11 / 22 / 2013
Transaction ID : SA11AI.117645
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
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 365 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR JAMES J LAYTON 147
 Full Name (Last, First, Middle Initial)
 Mailing Address 1063 UNDERWOOD RD
 City HINSDALE State NY Zip Code 14743
 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
 10 / 01 / 2013
Transaction ID : SA11AI.117702
 Amount of Each Receipt this Period
 150.00

B. MS PATRICIA H LEACH 157
 Full Name (Last, First, Middle Initial)
 Mailing Address 532 PFEIFFER RD
 City MARION CENTER State PA Zip Code 15759
 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 / 08 / 2013
Transaction ID : SA11AI.117712
 Amount of Each Receipt this Period
 225.00

C. MS PATRICIA H LEACH 157
 Full Name (Last, First, Middle Initial)
 Mailing Address 532 PFEIFFER RD
 City MARION CENTER State PA Zip Code 15759
 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 M / D D D / Y Y Y Y Y Y
 10 / 08 / 2013
Transaction ID : SA11AI.117713
 Amount of Each Receipt this Period
 225.00

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 366 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR A H LEATHERWOOD 379
 Full Name (Last, First, Middle Initial)
 Mailing Address 6752 GREENBROOK DR
 City KNOXVILLE State TN Zip Code 37931
 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 / 30 / 2013
Transaction ID : SA11Al.117736
 Amount of Each Receipt this Period
 50.00

B. MS JANE A LECHNER 520
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 219
 City GUTTENBERG State IA Zip Code 52052
 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 / 10 / 2013
Transaction ID : SA11Al.117768
 Amount of Each Receipt this Period
 150.00

C. MS JANE A LECHNER 520
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 219
 City GUTTENBERG State IA Zip Code 52052
 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
 07 / 12 / 2013
Transaction ID : SA11Al.117766
 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 367 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS JANE A LECHNER 520
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 219
 City State Zip Code
 GUTTENBERG IA 52052
 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 ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2013
Transaction ID : SA11AI.117767
 Amount of Each Receipt this Period
 100.00

B. MS MARILYN M LEEDOM 549
 Full Name (Last, First, Middle Initial)
 Mailing Address 1196 BLAKES WAY
 City State Zip Code
 MENASHA WI 54952
 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
 10 / 03 / 2013
Transaction ID : SA11AI.117862
 Amount of Each Receipt this Period
 50.00

C. MR DAVID LEEMHUIS 142
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 1972
 City State Zip Code
 BUFFALO NY 14240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NY STATE ENGINEER
 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
 12 / 05 / 2013
Transaction ID : SA11AI.117865
 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 368 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS SHIRLENE LEFLORE 588
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 522
 City ARNEGARD State ND Zip Code 58835
 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
 12 / 19 / 2013
Transaction ID : SA11Al.117881
 Amount of Each Receipt this Period
 50.00

B. MR DONALD W LE GORE 601
 Full Name (Last, First, Middle Initial)
 Mailing Address 214 FAIRVIEW DR
 City SAINT CHARLES State IL Zip Code 60174
 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
 08 / 26 / 2013
Transaction ID : SA11Al.117707
 Amount of Each Receipt this Period
 100.00

C. MR DONALD W LE GORE 601
 Full Name (Last, First, Middle Initial)
 Mailing Address 214 FAIRVIEW DR
 City SAINT CHARLES State IL Zip Code 60174
 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 ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2013
Transaction ID : SA11Al.117708
 Amount of Each Receipt this Period
 100.00

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 369 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS ISABEL B LEIB 117
 Full Name (Last, First, Middle Initial)
 Mailing Address 1281 WOLVER HOLLOW RD
 City OYSTER BAY State NY Zip Code 11771
 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 / 12 / 2013
Transaction ID : SA11AI.117931
 Amount of Each Receipt this Period
 350.00

B. MS ISABEL B LEIB 117
 Full Name (Last, First, Middle Initial)
 Mailing Address 1281 WOLVER HOLLOW RD
 City OYSTER BAY State NY Zip Code 11771
 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 / 12 / 2013
Transaction ID : SA11AI.117933
 Amount of Each Receipt this Period
 100.00

C. MS ISABEL B LEIB 117
 Full Name (Last, First, Middle Initial)
 Mailing Address 1281 WOLVER HOLLOW RD
 City OYSTER BAY State NY Zip Code 11771
 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
 11 / 11 / 2013
Transaction ID : SA11AI.117932
 Amount of Each Receipt this Period
 350.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 800.00
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 370 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR RICHARD C LEIGHTON 490
 Full Name (Last, First, Middle Initial)
 Mailing Address 56209 ANGEVINE RD
 City MENDON State MI Zip Code 49072
 Date of Receipt 09 / 23 / 2013
 Transaction ID : SA11AI.117952
 Amount of Each Receipt this Period 50.00
 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

B. MR RICHARD C LEIGHTON 490
 Full Name (Last, First, Middle Initial)
 Mailing Address 56209 ANGEVINE RD
 City MENDON State MI Zip Code 49072
 Date of Receipt 10 / 10 / 2013
 Transaction ID : SA11AI.117951
 Amount of Each Receipt this Period 50.00
 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

C. MR HARLAN R LEIMENSTOLL 461
 Full Name (Last, First, Middle Initial)
 Mailing Address 40 CLINTON CT
 City DANVILLE State IN Zip Code 46122
 Date of Receipt 09 / 27 / 2013
 Transaction ID : SA11AI.117959
 Amount of Each Receipt this Period 25.00
 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

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
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 371 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR HARLAN R LEIMENSTOLL 461
 Full Name (Last, First, Middle Initial)
 Mailing Address 40 CLINTON CT
 City DANVILLE State IN Zip Code 46122
 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
 11 / 18 / 2013
Transaction ID : SA11AI.117960
 Amount of Each Receipt this Period
 200.00

B. MR HARLAN R LEIMENSTOLL 461
 Full Name (Last, First, Middle Initial)
 Mailing Address 40 CLINTON CT
 City DANVILLE State IN Zip Code 46122
 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
 12 / 27 / 2013
Transaction ID : SA11AI.117958
 Amount of Each Receipt this Period
 25.00

C. MS TERRIE LENERT 770
 Full Name (Last, First, Middle Initial)
 Mailing Address 11320 BOTHWELL WAY
 City HOUSTON State TX Zip Code 77024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation UNEMPLOYED
 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 / 01 / 2013
Transaction ID : SA11AI.118024
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 245.00
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 372 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS TERRIE LENERT 770		Date of Receipt
Mailing Address 11320 BOTHWELL WAY		<input type="text" value="08"/> / <input type="text" value="13"/> / <input type="text" value="2013"/>
City	State	Zip Code
HOUSTON	TX	77024
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.118023
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
NONE	UNEMPLOYED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="600.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MS ONA LESTER 300		Date of Receipt
Mailing Address 1101 HUMPHRIES RD NW		<input type="text" value="08"/> / <input type="text" value="21"/> / <input type="text" value="2013"/>
City	State	Zip Code
CONYERS	GA	30012
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.118123
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<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="225.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MS ONA LESTER 300		Date of Receipt
Mailing Address 1101 HUMPHRIES RD NW		<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2013"/>
City	State	Zip Code
CONYERS	GA	30012
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.118125
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<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="275.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="200.00"/>
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 373 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS ONA LESTER 300
 Full Name (Last, First, Middle Initial)
 Mailing Address 1101 HUMPHRIES RD NW
 City State Zip Code
 CONYERS GA 30012
 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 M / D D D / Y Y Y Y Y Y
 12 / 13 / 2013
Transaction ID : SA11Al.118124
 Amount of Each Receipt this Period
 50.00

B. MR RONNIE LETCHER 882
 Full Name (Last, First, Middle Initial)
 Mailing Address P O BOX 542
 City State Zip Code
 ARTESIA NM 88211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 LETCHER & GOLDEN ASSOCIATES INSURANCE BROKER
 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
 12 / 27 / 2013
Transaction ID : SA11Al.118135
 Amount of Each Receipt this Period
 150.00

C. MS LOIS A LEWIS 780
 Full Name (Last, First, Middle Initial)
 Mailing Address 7450 COUNTY ROAD 331
 City State Zip Code
 JOURDANTON TX 78026
 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 ▼
 333.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 07 / 2013
Transaction ID : SA11Al.118257
 Amount of Each Receipt this Period
 111.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 311.00
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 374 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS DOROTHY L LEWIS 956
 Full Name (Last, First, Middle Initial)
 Mailing Address 2415 SHIRLAND PARK PL
 City AUBURN State CA Zip Code 95603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 13 / 2013
Transaction ID : SA11AI.118271
 Amount of Each Receipt this Period
 125.00

B. MRS SHIRLEY LEWIS 959
 Full Name (Last, First, Middle Initial)
 Mailing Address 12634 GIANELLA RD
 City CHICO State CA Zip Code 95973
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation ENTREPRENEUR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 26 / 2013
Transaction ID : SA11AI.118273
 Amount of Each Receipt this Period
 200.00

C. MR NICOL LIBERAL 112
 Full Name (Last, First, Middle Initial)
 Mailing Address 2904 BEVERLEY RD
 City BROOKLYN State NY Zip Code 11226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 18 / 2013
Transaction ID : SA11AI.118290
 Amount of Each Receipt this Period
 400.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 725.00
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 375 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR VERNAL A LIND 565
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 467
 City BATTLE LAKE State MN Zip Code 56515
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation TEACHER
 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 / 09 / 2013
Transaction ID : SA11AI.118365
 Amount of Each Receipt this Period
 100.00

B. MR FRANK K LITTLE 430
 Full Name (Last, First, Middle Initial)
 Mailing Address 5517 CHELSEA PARK DR
 City DUBLIN State OH Zip Code 43016
 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 / 18 / 2013
Transaction ID : SA11AI.118505
 Amount of Each Receipt this Period
 100.00

C. MR FRANK K LITTLE 430
 Full Name (Last, First, Middle Initial)
 Mailing Address 5517 CHELSEA PARK DR
 City DUBLIN State OH Zip Code 43016
 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
 11 / 11 / 2013
Transaction ID : SA11AI.118506
 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 376 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR DONALD L LJUNGREN 553
 Full Name (Last, First, Middle Initial)
 Mailing Address 945 CENTURY AVE SW APT 214
 City HUTCHINSON State MN Zip Code 55350
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 03 / 2013
Transaction ID : SA11AI.118553
 Amount of Each Receipt this Period
 75.00

B. MR DONALD L LJUNGREN 553
 Full Name (Last, First, Middle Initial)
 Mailing Address 945 CENTURY AVE SW APT 214
 City HUTCHINSON State MN Zip Code 55350
 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 / 20 / 2013
Transaction ID : SA11AI.118552
 Amount of Each Receipt this Period
 25.00

C. MR DONALD L LJUNGREN 553
 Full Name (Last, First, Middle Initial)
 Mailing Address 945 CENTURY AVE SW APT 214
 City HUTCHINSON State MN Zip Code 55350
 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 / 24 / 2013
Transaction ID : SA11AI.118549
 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: PAGE 377 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR DONALD L LJUNGREN 553
 Full Name (Last, First, Middle Initial)
 Mailing Address 945 CENTURY AVE SW APT 214
 City HUTCHINSON State MN Zip Code 55350
 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
 10 / 28 / 2013
Transaction ID : SA11AI.118548
 Amount of Each Receipt this Period
 100.00

B. MR DONALD L LJUNGREN 553
 Full Name (Last, First, Middle Initial)
 Mailing Address 945 CENTURY AVE SW APT 214
 City HUTCHINSON State MN Zip Code 55350
 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 ▼ 575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2013
Transaction ID : SA11AI.118550
 Amount of Each Receipt this Period
 75.00

C. MR DONALD L LJUNGREN 553
 Full Name (Last, First, Middle Initial)
 Mailing Address 945 CENTURY AVE SW APT 214
 City HUTCHINSON State MN Zip Code 55350
 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 M / D D D / Y Y Y Y Y Y
 12 / 24 / 2013
Transaction ID : SA11AI.118551
 Amount of Each Receipt this Period
 100.00

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:	PAGE 378 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

A. MS LYNETTE LOEWER 705
 Full Name (Last, First, Middle Initial)
 Mailing Address 332 CARL LOEWER RD
 City EUNICE State LA Zip Code 70535
 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 / 10 / 2013
Transaction ID : SA11AI.118636
 Amount of Each Receipt this Period
 150.00

B. MS MARY M LOFSTROM 329
 Full Name (Last, First, Middle Initial)
 Mailing Address 9025 SOMERSET BAY LN
 APT 302
 City VERO BEACH State FL Zip Code 32963
 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
 11 / 19 / 2013
Transaction ID : SA11AI.118644
 Amount of Each Receipt this Period
 100.00

C. MR THOMAS LOGES 454
 Full Name (Last, First, Middle Initial)
 Mailing Address 5748 MARKEY RD
 City DAYTON State OH Zip Code 45415
 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 / 11 / 2013
Transaction ID : SA11AI.118671
 Amount of Each Receipt this Period
 100.00

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: PAGE 379 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial)
A. MR THOMAS LOGES 454

Mailing Address 5748 MARKEY RD

City State Zip Code
DAYTON OH 45415

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
 10 / 04 / 2013
Transaction ID : SA11AI.118672

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. MS ROSE S LONG 100

Mailing Address 969 PARK AVE

City State Zip Code
NEW YORK NY 10028

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
 08 / 16 / 2013
Transaction ID : SA11AI.118697

Amount of Each Receipt this Period
75.00

Full Name (Last, First, Middle Initial)
C. MS MARY S LONG 381

Mailing Address 7578 OLD MILL CV

City State Zip Code
GERMANTOWN TN 38138

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
 08 / 08 / 2013
Transaction ID : SA11AI.118722

Amount of Each Receipt this Period
100.00

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 380 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS MARY S LONG 381
 Full Name (Last, First, Middle Initial)
 Mailing Address 7578 OLD MILL CV
 City GERMANTOWN State TN Zip Code 38138
 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
 11 / 08 / 2013
Transaction ID : SA11AI.118721
 Amount of Each Receipt this Period
 100.00

B. MR DON J LONG 656
 Full Name (Last, First, Middle Initial)
 Mailing Address 1830 HILL HAVEN RD
 City HOLLISTER State MO Zip Code 65672
 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 ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 19 / 2013
Transaction ID : SA11AI.118731
 Amount of Each Receipt this Period
 100.00

C. MS CONNIE LOPEZ 958
 Full Name (Last, First, Middle Initial)
 Mailing Address 5320 64TH ST
 City SACRAMENTO State CA Zip Code 95820
 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 / 15 / 2013
Transaction ID : SA11AI.118796
 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 381 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS CONNIE LOPEZ 958
 Full Name (Last, First, Middle Initial)
 Mailing Address 5320 64TH ST
 City SACRAMENTO State CA Zip Code 95820
 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 ▼ 410.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2013
Transaction ID : SA11AI.118797
 Amount of Each Receipt this Period
 150.00

B. Philip Lorbett 946
 Full Name (Last, First, Middle Initial)
 Mailing Address 1121 Everett Ave
 City Oakland State CA Zip Code 94602
 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 ▼ 201.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2013
Transaction ID : SA11AI.145649
 Amount of Each Receipt this Period
 100.00

C. MR JERRY W LORETT 740
 Full Name (Last, First, Middle Initial)
 Mailing Address 1241 CIRCLE DR
 City SAPULPA State OK Zip Code 74066
 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 / 10 / 2013
Transaction ID : SA11AI.118808
 Amount of Each Receipt this Period
 100.00

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 382 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR JERRY W LORETT 740
 Full Name (Last, First, Middle Initial)
 Mailing Address 1241 CIRCLE DR
 City SAPULPA State OK Zip Code 74066
 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
 08 / 12 / 2013
Transaction ID : SA11AI.118809
 Amount of Each Receipt this Period
 100.00

B. MR JERRY W LORETT 740
 Full Name (Last, First, Middle Initial)
 Mailing Address 1241 CIRCLE DR
 City SAPULPA State OK Zip Code 74066
 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
 10 / 10 / 2013
Transaction ID : SA11AI.118810
 Amount of Each Receipt this Period
 100.00

C. MRS BONNIE LOSKILL 689
 Full Name (Last, First, Middle Initial)
 Mailing Address 1235 N LAIRD AVE
 City HASTINGS State NE Zip Code 68901
 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 / 27 / 2013
Transaction ID : SA11AI.118832
 Amount of Each Receipt this Period
 150.00

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: PAGE 383 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS JUDITH LOTHMANN 481
 Full Name (Last, First, Middle Initial)
 Mailing Address 1721 CLFS LNDG APT 5
 City YPSILANTI State MI Zip Code 48198
 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 / 30 / 2013
Transaction ID : SA11AI.118838
 Amount of Each Receipt this Period
 150.00

B. MS JUDITH LOTHMANN 481
 Full Name (Last, First, Middle Initial)
 Mailing Address 1721 CLFS LNDG APT 5
 City YPSILANTI State MI Zip Code 48198
 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
 12 / 30 / 2013
Transaction ID : SA11AI.118839
 Amount of Each Receipt this Period
 150.00

C. MR ALLAN LOWSON 895
 Full Name (Last, First, Middle Initial)
 Mailing Address 11355 CARIBOU RD
 City RENO State NV Zip Code 89511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 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
 11 / 12 / 2013
Transaction ID : SA11AI.118915
 Amount of Each Receipt this Period
 25.00

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 384 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR FRED B LUCERO 798
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 1970
 City CANUTILLO State TX Zip Code 79835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 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 / 2013
Transaction ID : SA11AI.118960
 Amount of Each Receipt this Period
 100.00

B. MR ANTHONY D LUCIANO 064
 Full Name (Last, First, Middle Initial)
 Mailing Address 13 ANDRUS DR
 City MILFORD State CT Zip Code 06461
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CT SCHOOL OF MEDICINE Occupation PROFESSOR
 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 / 22 / 2013
Transaction ID : SA11AI.118967
 Amount of Each Receipt this Period
 75.00

C. MR ANTHONY D LUCIANO 064
 Full Name (Last, First, Middle Initial)
 Mailing Address 13 ANDRUS DR
 City MILFORD State CT Zip Code 06461
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CT SCHOOL OF MEDICINE Occupation PROFESSOR
 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 / 09 / 2013
Transaction ID : SA11AI.118965
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	225.00
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 385 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR ANTHONY D LUCIANO 064

Full Name (Last, First, Middle Initial)
Mailing Address 13 ANDRUS DR

City State Zip Code
MILFORD CT 06461

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

Name of Employer Occupation
CT SCHOOL OF MEDICINE PROFESSOR

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
12 / 09 / 2013
Transaction ID : SA11AI.118966

Amount of Each Receipt this Period
50.00

B. MR LAWRENCE E LUDD 321

Full Name (Last, First, Middle Initial)
Mailing Address 4405 SEA MIST DR
APT 114

City State Zip Code
NEW SMYRNA FL 32169

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 ▼
600.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2013
Transaction ID : SA11AI.118974

Amount of Each Receipt this Period
225.00

C. MR LAWRENCE E LUDD 321

Full Name (Last, First, Middle Initial)
Mailing Address 4405 SEA MIST DR
APT 114

City State Zip Code
NEW SMYRNA FL 32169

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 ▼
825.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 21 / 2013
Transaction ID : SA11AI.118975

Amount of Each Receipt this Period
225.00

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 386 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR JAMES S LUDWICK 786
 Full Name (Last, First, Middle Initial)
 Mailing Address 1322 ROCKY CRK DR
 City PFLUGERVILLE State TX Zip Code 78660
 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
 11 / 21 / 2013
Transaction ID : SA11AI.118994
 Amount of Each Receipt this Period
 250.00

B. MS MARY JANE A LUGOVSKY 117
 Full Name (Last, First, Middle Initial)
 Mailing Address 22 CHERRY LN
 City LAKE GROVE State NY Zip Code 11755
 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 / 12 / 2013
Transaction ID : SA11AI.119015
 Amount of Each Receipt this Period
 50.00

C. MR DAVID L LUKE 100 III
 Full Name (Last, First, Middle Initial)
 Mailing Address 775 PARK AVE
 APT 7D
 City NEW YORK State NY Zip Code 10021
 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 / 01 / 2013
Transaction ID : SA11AI.119023
 Amount of Each Receipt this Period
 100.00

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: (check only one)	PAGE 387 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS JOYCE A LUNA 385
 Full Name (Last, First, Middle Initial)
 Mailing Address 1505 SPRINGBORO RD
 APT 7
 City COOKEVILLE State TN Zip Code 38506
 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 / 13 / 2013
Transaction ID : SA11AI.119038
 Amount of Each Receipt this Period
 150.00

B. MS AUDREY A LUNDGREN 970
 Full Name (Last, First, Middle Initial)
 Mailing Address 5820 BURMA RD
 City LAKE OSWEGO State OR Zip Code 97035
 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 / 02 / 2013
Transaction ID : SA11AI.119062
 Amount of Each Receipt this Period
 100.00

C. MS AUDREY A LUNDGREN 970
 Full Name (Last, First, Middle Initial)
 Mailing Address 5820 BURMA RD
 City LAKE OSWEGO State OR Zip Code 97035
 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
 11 / 04 / 2013
Transaction ID : SA11AI.119061
 Amount of Each Receipt this Period
 100.00

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: PAGE 388 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR JOSEPH LUPO 482
 Full Name (Last, First, Middle Initial)
 Mailing Address 1092 BLAIRMOOR CT
 City State Zip Code
 GROSE POINTE MI 48236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 LUPO CHIROPRACTIC CENTER CHIROPRACTOR - DC
 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 / 2013
Transaction ID : SA11AI.119084
 Amount of Each Receipt this Period
 100.00

B. MR JOSEPH LUPO 482
 Full Name (Last, First, Middle Initial)
 Mailing Address 1092 BLAIRMOOR CT
 City State Zip Code
 GROSE POINTE MI 48236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 LUPO CHIROPRACTIC CENTER CHIROPRACTOR - DC
 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
 12 / 19 / 2013
Transaction ID : SA11AI.119083
 Amount of Each Receipt this Period
 100.00

C. MR KEVIN D LUSSENDEN 488
 Full Name (Last, First, Middle Initial)
 Mailing Address 3282 DEAN RD
 City State Zip Code
 HOWELL MI 48855
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 PLUMBING 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 / 2013
Transaction ID : SA11AI.119097
 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 389 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR KEVIN D LUSSENDEN 488			Date of Receipt
Mailing Address 3282 DEAN RD			<input type="text" value="08"/> / <input type="text" value="06"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11AI.119093
HOWELL	MI	48855	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		
PLUMBING	RETIRED		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="450.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MR KEVIN D LUSSENDEN 488			Date of Receipt
Mailing Address 3282 DEAN RD			<input type="text" value="09"/> / <input type="text" value="09"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11AI.119096
HOWELL	MI	48855	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		
PLUMBING	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) ▼			

Full Name (Last, First, Middle Initial) C. MR KEVIN D LUSSENDEN 488			Date of Receipt
Mailing Address 3282 DEAN RD			<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11AI.119094
HOWELL	MI	48855	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		
PLUMBING	RETIRED		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="550.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="200.00"/>
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 390 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR KEVIN D LUSSENDEN 488		Date of Receipt
Mailing Address 3282 DEAN RD		<input type="text" value="11"/> / <input type="text" value="06"/> / <input type="text" value="2013"/>
City	State	Transaction ID : SA11Al.119095
HOWELL	MI	Amount of Each Receipt this Period
Zip Code		<input type="text" value="100.00"/>
48855		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
PLUMBING	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="650.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MRS JOAN E LUTZ 477		Date of Receipt
Mailing Address 7416 WREN DR		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2013"/>
City	State	Transaction ID : SA11Al.119109
EVANSVILLE	IN	Amount of Each Receipt this Period
Zip Code		<input type="text" value="50.00"/>
47715		
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="220.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MR LLOYD L LYFORD 960		Date of Receipt
Mailing Address 6768 HAPPY VALLEY RD		<input type="text" value="07"/> / <input type="text" value="15"/> / <input type="text" value="2013"/>
City	State	Transaction ID : SA11Al.119124
ANDERSON	CA	Amount of Each Receipt this Period
Zip Code		<input type="text" value="100.00"/>
96007		
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="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="250.00"/>
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 391 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR LLOYD L LYFORD 960
 Full Name (Last, First, Middle Initial)
 Mailing Address 6768 HAPPY VALLEY RD
 City ANDERSON State CA Zip Code 96007
 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 / 06 / 2013
Transaction ID : SA11Al.119126
 Amount of Each Receipt this Period
 75.00

B. MR LLOYD L LYFORD 960
 Full Name (Last, First, Middle Initial)
 Mailing Address 6768 HAPPY VALLEY RD
 City ANDERSON State CA Zip Code 96007
 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 ▼ 410.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2013
Transaction ID : SA11Al.119125
 Amount of Each Receipt this Period
 35.00

C. MS JEAN LYN 852
 Full Name (Last, First, Middle Initial)
 Mailing Address 18997 N 90TH WAY
 City SCOTTSDALE State AZ Zip Code 85255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation WRITER
 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
 10 / 21 / 2013
Transaction ID : SA11Al.119140
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	210.00
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 392 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. DR DONALD M LYNCH 074
Full Name (Last, First, Middle Initial)

Mailing Address 7 LEDGE RD

City WAYNE State NJ Zip Code 07470

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

Name of Employer DPM SOUTH LOOP CLINIC Occupation PODIATRIST

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
 11 / 29 / 2013
Transaction ID : SA11Al.119143

Amount of Each Receipt this Period
 100.00

B. MS WANDA LYNCH 334
Full Name (Last, First, Middle Initial)

Mailing Address 800 ANDREWS AVE APT 8

City DELRAY BEACH State FL Zip Code 33483

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 ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2013
Transaction ID : SA11Al.145691

Amount of Each Receipt this Period
 25.00

C. MS WANDA LYNCH 334
Full Name (Last, First, Middle Initial)

Mailing Address 800 ANDREWS AVE APT 8

City DELRAY BEACH State FL Zip Code 33483

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
 10 / 11 / 2013
Transaction ID : SA11Al.145692

Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional).....▶	160.00
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 393 OF 724
(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)
CONSERVATIVE MAJORITY FUND

A. MS WANDA LYNCH 334
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 ANDREWS AVE APT 8
 City DELRAY BEACH State FL Zip Code 33483
 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 ▼ 305.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 15 / 2013
Transaction ID : SA11Al.119148
 Amount of Each Receipt this Period
 50.00

B. MS CAROL LYNCH 993
 Full Name (Last, First, Middle Initial)
 Mailing Address 1505 57TH CT
 City WEST RICHLAND State WA Zip Code 99353
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PERFECT PUB INC Occupation PROPRIETOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 01 / 2013
Transaction ID : SA11Al.119156
 Amount of Each Receipt this Period
 200.00

C. MS CAROL LYNCH 993
 Full Name (Last, First, Middle Initial)
 Mailing Address 1505 57TH CT
 City WEST RICHLAND State WA Zip Code 99353
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PERFECT PUB INC Occupation PROPRIETOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 20 / 2013
Transaction ID : SA11Al.119157
 Amount of Each Receipt this Period
 200.00

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: PAGE 394 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR GUY MABEE 764
 Full Name (Last, First, Middle Initial)
 Mailing Address 2555 STAGECOACH TRL
 City GORDON State TX Zip Code 76453
 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 / 03 / 2013
Transaction ID : SA11AI.119215
 Amount of Each Receipt this Period
 225.00

B. MS CHARLOTTE MABRY 902
 Full Name (Last, First, Middle Initial)
 Mailing Address 16 WIDELOOP RD
 City ROLLING HILLS State CA Zip Code 90274
 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
 12 / 05 / 2013
Transaction ID : SA11AI.119226
 Amount of Each Receipt this Period
 50.00

C. MR ROBERT G MACHALA 484
 Full Name (Last, First, Middle Initial)
 Mailing Address 391 N M 13
 City LENNON State MI Zip Code 48449
 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
 11 / 11 / 2013
Transaction ID : SA11AI.119279
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00
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 395 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

A. MR ROBERT G MACHALA 484
 Full Name (Last, First, Middle Initial)
 Mailing Address 391 N M 13
 City LENNON State MI Zip Code 48449
 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
 12 / 23 / 2013
Transaction ID : SA11AI.119280
 Amount of Each Receipt this Period
 50.00

B. MR TOBY MACK 958
 Full Name (Last, First, Middle Initial)
 Mailing Address 10025 CIRRUS WAY
 City SACRAMENTO State CA Zip Code 95827
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TOBYMAC ONLINE TICKETING Occupation BUSINESS OWNER
 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
 12 / 13 / 2013
Transaction ID : SA11AI.119296
 Amount of Each Receipt this Period
 100.00

C. MS LELA MADERA 781
 Full Name (Last, First, Middle Initial)
 Mailing Address 1815 SCENIC VIEW DR
 City CANYON LAKE State TX Zip Code 78133
 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 / 26 / 2013
Transaction ID : SA11AI.119377
 Amount of Each Receipt this Period
 100.00

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 396 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS LINDA MAGEE 013		Date of Receipt
Mailing Address PO BOX 244		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code
COLRAIN	MA	01340
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.145695
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="190.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="340.00"/>	

Full Name (Last, First, Middle Initial) B. MR RUDY MAGGI 117		Date of Receipt
Mailing Address 105 GAIL CT		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code
EAST NORTHPORT	NY	11731
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.119413
Name of Employer	Occupation	Amount of Each Receipt this Period
CONSERVATIVE SOCIETY FOR ACTION	PATRIOT	<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 RUDY MAGGI 117		Date of Receipt
Mailing Address 105 GAIL CT		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code
EAST NORTHPORT	NY	11731
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.119412
Name of Employer	Occupation	Amount of Each Receipt this Period
CONSERVATIVE SOCIETY FOR ACTION	PATRIOT	<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="400.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="390.00"/>
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 397 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS SANDRA MAGUIRE 870
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 1514
 City State Zip Code
 EDGEWOOD NM 87015
 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
 07 / 11 / 2013
Transaction ID : SA11Al.119435
 Amount of Each Receipt this Period
 70.00

B. MS SANDRA MAGUIRE 870
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 1514
 City State Zip Code
 EDGEWOOD NM 87015
 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 ▼
 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 10 / 2013
Transaction ID : SA11Al.119434
 Amount of Each Receipt this Period
 50.00

C. MS SANDRA MAGUIRE 870
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 1514
 City State Zip Code
 EDGEWOOD NM 87015
 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 ▼
 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2013
Transaction ID : SA11Al.119433
 Amount of Each Receipt this Period
 70.00

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 398 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR THOMAS J MAHER 117		Date of Receipt
Mailing Address 49 NELSON AVE		<input type="text" value="12"/> / <input type="text" value="04"/> / <input type="text" value="2013"/>
City	State	Zip Code
BLUE POINT	NY	11715
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="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="150.00"/>
Transaction ID : SA11Al.119450		

Full Name (Last, First, Middle Initial) B. MR LLOYD M MAHONEY 406		Date of Receipt
Mailing Address 4520 LOUISVILLE RD		<input type="text" value="07"/> / <input type="text" value="10"/> / <input type="text" value="2013"/>
City	State	Zip Code
FRANKFORT	KY	40601
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
RETIRED	CIVIL ENGINEER	
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"/>	
		Amount of Each Receipt this Period
		<input type="text" value="200.00"/>
Transaction ID : SA11Al.119466		

Full Name (Last, First, Middle Initial) C. MR LLOYD M MAHONEY 406		Date of Receipt
Mailing Address 4520 LOUISVILLE RD		<input type="text" value="08"/> / <input type="text" value="13"/> / <input type="text" value="2013"/>
City	State	Zip Code
FRANKFORT	KY	40601
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
RETIRED	CIVIL ENGINEER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="800.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Transaction ID : SA11Al.119467		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="450.00"/>
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 399 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR HENRY MAIER 115		Date of Receipt
Mailing Address 157 LAKEVIEW AVE		<input type="text" value="12"/> / <input type="text" value="06"/> / <input type="text" value="2013"/>
City	State	Transaction ID : SA11AI.119474
LYNBROOK	NY	Amount of Each Receipt this Period
Zip Code		<input type="text" value="25.00"/>
11563		
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="375.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MR GRIGOR MAKARIAN 111		Date of Receipt
Mailing Address 4318 25TH AVE		<input type="text" value="08"/> / <input type="text" value="16"/> / <input type="text" value="2013"/>
City	State	Transaction ID : SA11AI.119509
ASTORIA	NY	Amount of Each Receipt this Period
Zip Code		<input type="text" value="75.00"/>
11103		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
ANI PIZZA PALACE	MANAGER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="225.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MR GRIGOR MAKARIAN 111		Date of Receipt
Mailing Address 4318 25TH AVE		<input type="text" value="10"/> / <input type="text" value="07"/> / <input type="text" value="2013"/>
City	State	Transaction ID : SA11AI.119510
ASTORIA	NY	Amount of Each Receipt this Period
Zip Code		<input type="text" value="75.00"/>
11103		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
ANI PIZZA PALACE	MANAGER	
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) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="175.00"/>
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 400 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. DR MIKE S MAKUCH 300 DMD
 Full Name (Last, First, Middle Initial)
 Mailing Address 13990 FREEMANVILLE RD
 City ALPHARETTA State GA Zip Code 30004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GENERAL DENTISTRY Occupation DENTIST
 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 / 05 / 2013
Transaction ID : SA11AI.119522
 Amount of Each Receipt this Period
 100.00

B. DR MIKE S MAKUCH 300 DMD
 Full Name (Last, First, Middle Initial)
 Mailing Address 13990 FREEMANVILLE RD
 City ALPHARETTA State GA Zip Code 30004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GENERAL DENTISTRY Occupation DENTIST
 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
 11 / 05 / 2013
Transaction ID : SA11AI.119523
 Amount of Each Receipt this Period
 100.00

C. MS SHARON MALARKEY 970
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 1186
 City SCAPPOOSE State OR Zip Code 97056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MALARKEY ROOFING CO Occupation ROOFER
 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 / 24 / 2013
Transaction ID : SA11AI.119528
 Amount of Each Receipt this Period
 150.00

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:	PAGE 401 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS SHARON MALARKEY 970			Date of Receipt
Mailing Address PO BOX 1186			<input type="text" value="10"/> / <input type="text" value="07"/> / <input type="text" value="2013"/>
City SCAPPOOSE	State OR	Zip Code 97056	Transaction ID : SA11Al.119529
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="200.00"/>
Name of Employer MALARKEY ROOFING CO	Occupation ROOFER		Aggregate Year-to-Date ▼ <input type="text" value="650.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MS SHARON MALARKEY 970			Date of Receipt
Mailing Address PO BOX 1186			<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2013"/>
City SCAPPOOSE	State OR	Zip Code 97056	Transaction ID : SA11Al.119530
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="150.00"/>
Name of Employer MALARKEY ROOFING CO	Occupation ROOFER		Aggregate Year-to-Date ▼ <input type="text" value="800.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. MR RICHARD E MALLARD 320			Date of Receipt
Mailing Address 4922 RIVER RD			<input type="text" value="11"/> / <input type="text" value="19"/> / <input type="text" value="2013"/>
City HILLIARD	State FL	Zip Code 32046	Transaction ID : SA11Al.119556
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 MALLARD CONSULTING CO	Occupation PRESIDENT		Aggregate Year-to-Date ▼ <input type="text" value="310.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

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: PAGE 402 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR DARRELL MALUTIN 996
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 190
 City OUZINKIE State AK Zip Code 99644
 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
 10 / 02 / 2013
Transaction ID : SA11AI.145718
 Amount of Each Receipt this Period
 150.00

B. MS NANCY MALVESTA 038
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 83
 City EATON CENTER State NH Zip Code 03832
 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
 12 / 11 / 2013
Transaction ID : SA11AI.119599
 Amount of Each Receipt this Period
 150.00

C. MS MARIA R MANETTA 088
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 FOREST HILL DR
 City FLEMINGTON State NJ Zip Code 08822
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 STAY AT HOME HOMEMAKER
 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
 10 / 21 / 2013
Transaction ID : SA11AI.119622
 Amount of Each Receipt this Period
 250.00

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 403 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS NANCY R MANG 080		Date of Receipt
Mailing Address 3 WESTWOOD DR		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Transaction ID : SA11AI.119628
HADDONFIELD	NJ	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	HOMEMAKER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="225.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MS NANCY R MANG 080		Date of Receipt
Mailing Address 3 WESTWOOD DR		<input type="text" value="12"/> / <input type="text" value="27"/> / <input type="text" value="2013"/>
City	State	Transaction ID : SA11AI.119627
HADDONFIELD	NJ	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	HOMEMAKER	
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) C. MR NAZARENE J MANGINI 342		Date of Receipt
Mailing Address 2606 RIVER WOODS DR		<input type="text" value="08"/> / <input type="text" value="21"/> / <input type="text" value="2013"/>
City	State	Transaction ID : SA11AI.119642
PARRISH	FL	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="375.00"/>	
<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"/>

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

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

FOR LINE NUMBER: PAGE 404 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR NAZARENE J MANGINI 342
 Full Name (Last, First, Middle Initial)
 Mailing Address 2606 RIVER WOODS DR
 City PARRISH State FL Zip Code 34219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 09 / 2013
Transaction ID : SA11AI.119643
 Amount of Each Receipt this Period
 -100.00

B. MR MARK MANLEY 774
 Full Name (Last, First, Middle Initial)
 Mailing Address 13526 GREENWOOD MANOR DR
 City CYPRESS State TX Zip Code 77429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HYDROCARBON DATA SYSTEMS Occupation EXECUTIVE
 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
 10 / 14 / 2013
Transaction ID : SA11AI.119652
 Amount of Each Receipt this Period
 500.00

C. MS JANET D MANSON 210
 Full Name (Last, First, Middle Initial)
 Mailing Address 1002 FALLSCROFT WAY
 City LUTHERVILLE TIMONI State MD Zip Code 21093
 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 / 03 / 2013
Transaction ID : SA11AI.119710
 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: (check only one)	PAGE 405 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MRS SYLVIA J MANSON 950
 Full Name (Last, First, Middle Initial)
 Mailing Address 113 OCEAN VIEW AVE
 City SANTA CRUZ State CA Zip Code 95062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 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 / 17 / 2013
Transaction ID : SA11AI.119712
 Amount of Each Receipt this Period
 100.00

B. MS JOYCE A MAPLE 634
 Full Name (Last, First, Middle Initial)
 Mailing Address 121 E STANLEY AVE
 City PALMYRA State MO Zip Code 63461
 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 / 15 / 2013
Transaction ID : SA11AI.119736
 Amount of Each Receipt this Period
 100.00

C. MR JAMES MARKER 835
 Full Name (Last, First, Middle Initial)
 Mailing Address 311 STEWART DR
 City LEWISTON State ID Zip Code 83501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer IDAHO TRUCK SALES Occupation SALESMAN
 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 / 06 / 2013
Transaction ID : SA11AI.119838
 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 406 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR DAVID T MARSHBURN 278
 Full Name (Last, First, Middle Initial)
 Mailing Address 905 WOODLAWN DR
 City WILLIAMSTON State NC Zip Code 27892
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 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 / 30 / 2013
Transaction ID : SA11AI.119960
 Amount of Each Receipt this Period
 225.00

B. MRS NATALIE A MARTEL 037
 Full Name (Last, First, Middle Initial)
 Mailing Address 335 BRUSHWOOD RD
 City NORTH HAVERHILL State NH Zip Code 03774
 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 / 11 / 2013
Transaction ID : SA11AI.119968
 Amount of Each Receipt this Period
 50.00

C. MRS NATALIE A MARTEL 037
 Full Name (Last, First, Middle Initial)
 Mailing Address 335 BRUSHWOOD RD
 City NORTH HAVERHILL State NH Zip Code 03774
 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
 10 / 10 / 2013
Transaction ID : SA11AI.119969
 Amount of Each Receipt this Period
 50.00

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 407 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR GUENTHER H MARTENS 293
 Full Name (Last, First, Middle Initial)
 Mailing Address 1298 PACOLET HWY
 City GAFFNEY State SC Zip Code 29340
 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 ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2013
Transaction ID : SA11AI.119975
 Amount of Each Receipt this Period
 200.00

B. MR CONRAD MARTIN 392
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 3684
 City JACKSON State MS Zip Code 39207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CONRAD MARTIN REAL ESTATE Occupation REALTOR
 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 / 29 / 2013
Transaction ID : SA11AI.120042
 Amount of Each Receipt this Period
 50.00

C. MR CONRAD MARTIN 392
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 3684
 City JACKSON State MS Zip Code 39207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CONRAD MARTIN REAL ESTATE Occupation REALTOR
 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
 10 / 21 / 2013
Transaction ID : SA11AI.120043
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	120.00
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 408 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS JOAN MARTIN 490
 Full Name (Last, First, Middle Initial)
 Mailing Address 3516 ARBUTUS TRL
 City PORTAGE State MI Zip Code 49024
 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
 10 / 04 / 2013
Transaction ID : SA11AI.120061
 Amount of Each Receipt this Period
 150.00

B. MS MARIE D MASTERS 548
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 302
 City WEBSTER State WI Zip Code 54893
 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 15 / 2013
Transaction ID : SA11AI.120248
 Amount of Each Receipt this Period
 75.00

C. MS MARIE D MASTERS 548
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 302
 City WEBSTER State WI Zip Code 54893
 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 ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2013
Transaction ID : SA11AI.120249
 Amount of Each Receipt this Period
 50.00

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:	PAGE 409 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

A. MS MARIE D MASTERS 548
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 302
 City WEBSTER State WI Zip Code 54893
 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 ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 19 / 2013
Transaction ID : SA11AI.120250
 Amount of Each Receipt this Period
 500.00

B. MR LAWRENCE MASTRANTONI 140
 Full Name (Last, First, Middle Initial)
 Mailing Address 4283 SHEVA LN
 City HAMBURG State NY Zip Code 14075
 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
 08 / 26 / 2013
Transaction ID : SA11AI.120259
 Amount of Each Receipt this Period
 100.00

C. MR LAWRENCE MASTRANTONI 140
 Full Name (Last, First, Middle Initial)
 Mailing Address 4283 SHEVA LN
 City HAMBURG State NY Zip Code 14075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 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
 11 / 11 / 2013
Transaction ID : SA11AI.120260
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	175.00
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 410 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR ROBERT N MATOKA 152
 Full Name (Last, First, Middle Initial)
 Mailing Address 140 PERRYVISTA AVE
 City PITTSBURGH State PA Zip Code 15237
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation Bookkeeper
 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
 10 / 22 / 2013
Transaction ID : SA11AI.145778
 Amount of Each Receipt this Period
 100.00

B. MR ROBERT N MATOKA 152
 Full Name (Last, First, Middle Initial)
 Mailing Address 140 PERRYVISTA AVE
 City PITTSBURGH State PA Zip Code 15237
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation Bookkeeper
 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
 11 / 25 / 2013
Transaction ID : SA11AI.120326
 Amount of Each Receipt this Period
 100.00

C. MS CONNIE M MATTEO 080
 Full Name (Last, First, Middle Initial)
 Mailing Address 14 GEORGIA OKEEFE WAY
 City MARLTON State NJ Zip Code 08053
 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
 12 / 05 / 2013
Transaction ID : SA11AI.120338
 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 411 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR WILLIAM B MATTINGLY 640
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 1092
 City RAYMORE State MO Zip Code 64083
 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 / 16 / 2013
Transaction ID : SA11AI.120362
 Amount of Each Receipt this Period
 100.00

B. MR WILLIAM B MATTINGLY 640
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 1092
 City RAYMORE State MO Zip Code 64083
 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
 11 / 18 / 2013
Transaction ID : SA11AI.120363
 Amount of Each Receipt this Period
 100.00

C. MS WILMA MAYZLIK 559
 Full Name (Last, First, Middle Initial)
 Mailing Address 1601 3RD AVE SW
 City AUSTIN State MN Zip Code 55912
 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 / 06 / 2013
Transaction ID : SA11AI.120503
 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 412 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS WILMA MAYZLIK 559		Date of Receipt
Mailing Address 1601 3RD AVE SW		<input type="text" value="12"/> / <input type="text" value="11"/> / <input type="text" value="2013"/>
City	State	Zip Code
AUSTIN	MN	55912
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.120502
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="270.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="270.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MS FARRAH MCALEXANDER 386		Date of Receipt
Mailing Address 624 VAN BUREN AVE		<input type="text" value="08"/> / <input type="text" value="26"/> / <input type="text" value="2013"/>
City	State	Zip Code
OXFORD	MS	38655
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.120572
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="150.00"/>
Name of Employer	Occupation	
NONE	HOMEMAKER	
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 ROBERT A MCCAFFREY 105		Date of Receipt
Mailing Address 138 MAIN ST		<input type="text" value="07"/> / <input type="text" value="09"/> / <input type="text" value="2013"/>
City	State	Zip Code
COLD SPRING	NY	10516
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.120629
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
ROBERT MCCAFFREY REALTY	REALTOR	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="350.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="270.00"/>
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 413 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS JANE MCCAIN 430
Full Name (Last, First, Middle Initial)
Mailing Address 942 BETTY AVE

City HEATH	State OH	Zip Code 43056
---------------	-------------	-------------------

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 ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2013

Transaction ID : SA11AI.120639

Amount of Each Receipt this Period
100.00

B. MS JANE MCCAIN 430
Full Name (Last, First, Middle Initial)
Mailing Address 942 BETTY AVE

City HEATH	State OH	Zip Code 43056
---------------	-------------	-------------------

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 ▼
340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	26	/	2013

Transaction ID : SA11AI.120638

Amount of Each Receipt this Period
100.00

C. MS MARJORIE J MCCONNELL 853
Full Name (Last, First, Middle Initial)
Mailing Address 15414 W PINCHOT CT

City GOODYEAR	State AZ	Zip Code 85395
------------------	-------------	-------------------

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
10	/	11	/	2013

Transaction ID : SA11AI.120784

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 414 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS MARJORIE J MCCONNELL 853		Date of Receipt
Mailing Address 15414 W PINCHOT CT		<input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2013"/>
City	State	Transaction ID : SA11AI.120785
GOODYEAR	AZ	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	Zip Code	<input type="text" value="100.00"/>
C	85395	
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. MS MARJORIE J MCCONNELL 853		Date of Receipt
Mailing Address 15414 W PINCHOT CT		<input type="text" value="12"/> / <input type="text" value="16"/> / <input type="text" value="2013"/>
City	State	Transaction ID : SA11AI.120783
GOODYEAR	AZ	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	Zip Code	<input type="text" value="50.00"/>
C	85395	
Name of Employer	Occupation	
NONE	RETIRED	
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 MICHAEL S MCCRARY 921		Date of Receipt
Mailing Address 953 OLIVE AVE		<input type="text" value="08"/> / <input type="text" value="13"/> / <input type="text" value="2013"/>
City	State	Transaction ID : SA11AI.120824
CORONADO	CA	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	Zip Code	<input type="text" value="150.00"/>
C	92118	
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="450.00"/>	
<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"/>

**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 415 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR MICHAEL S MCCRARY 921
 Full Name (Last, First, Middle Initial)
 Mailing Address 953 OLIVE AVE
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 13 / 2013
Transaction ID : SA11AI.120825
 Amount of Each Receipt this Period
 150.00

B. MS MARGARET E MCCREERY 453
 Full Name (Last, First, Middle Initial)
 Mailing Address 542 N GALLOWAY ST
 City XENIA State OH Zip Code 45385
 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
 09 / 25 / 2013
Transaction ID : SA11AI.120842
 Amount of Each Receipt this Period
 50.00

C. MS MARGARET E MCCREERY 453
 Full Name (Last, First, Middle Initial)
 Mailing Address 542 N GALLOWAY ST
 City XENIA State OH Zip Code 45385
 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
 11 / 18 / 2013
Transaction ID : SA11AI.120841
 Amount of Each Receipt this Period
 75.00

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 416 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS MARGARET E MCCREERY 453		Date of Receipt
Mailing Address 542 N GALLOWAY ST		<input type="text" value="12"/> / <input type="text" value="25"/> / <input type="text" value="2013"/>
City	State	Zip Code
XENIA	OH	45385
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.120840
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="475.00"/>	

Full Name (Last, First, Middle Initial) B. MR JAMES F MCCRORY 360		Date of Receipt
Mailing Address 426 PARKWOOD DR		<input type="text" value="07"/> / <input type="text" value="22"/> / <input type="text" value="2013"/>
City	State	Zip Code
PRATTVILLE	AL	36067
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.120846
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="250.00"/>	

Full Name (Last, First, Middle Initial) C. MR JAMES F MCCRORY 360		Date of Receipt
Mailing Address 426 PARKWOOD DR		<input type="text" value="08"/> / <input type="text" value="26"/> / <input type="text" value="2013"/>
City	State	Zip Code
PRATTVILLE	AL	36067
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.120848
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<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="450.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="500.00"/>
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 417 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR JAMES F MCCRORY 360
 Full Name (Last, First, Middle Initial)
 Mailing Address 426 PARKWOOD DR
 City PRATTVILLE State AL Zip Code 36067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 08 / 2013
Transaction ID : SA11Al.120849
 Amount of Each Receipt this Period
 100.00

B. MR JAMES F MCCRORY 360
 Full Name (Last, First, Middle Initial)
 Mailing Address 426 PARKWOOD DR
 City PRATTVILLE State AL Zip Code 36067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2013
Transaction ID : SA11Al.120847
 Amount of Each Receipt this Period
 100.00

C. MS DONNA MCELMURRY 774
 Full Name (Last, First, Middle Initial)
 Mailing Address 23 REMINGTON PARK
 City KATY State TX Zip Code 77493
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 09 / 2013
Transaction ID : SA11Al.120970
 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 418 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS DONNA MCELMURRY 774
 Full Name (Last, First, Middle Initial)
 Mailing Address 23 REMINGTON PARK
 City KATY State TX Zip Code 77493
 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 09 / 2013
Transaction ID : SA11AI.120971
 Amount of Each Receipt this Period
 100.00

B. MS PATRICIA MCGAHAN 619
 Full Name (Last, First, Middle Initial)
 Mailing Address 1106 WISCONSIN AVE
 City WINDSOR State IL Zip Code 61957
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation FARMER
 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 / 03 / 2013
Transaction ID : SA11AI.121023
 Amount of Each Receipt this Period
 100.00

C. MS PATRICIA MCGAHAN 619
 Full Name (Last, First, Middle Initial)
 Mailing Address 1106 WISCONSIN AVE
 City WINDSOR State IL Zip Code 61957
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation FARMER
 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
 10 / 03 / 2013
Transaction ID : SA11AI.121024
 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 419 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR EDWARD J MCGEE 206
 Full Name (Last, First, Middle Initial)
 Mailing Address 6420 HAWTHORNE RD
 City LA PLATA State MD Zip Code 20646
 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 ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 08 / 2013
Transaction ID : SA11AI.121041
 Amount of Each Receipt this Period
 75.00

B. MR JAMES C MCGINNIS 066
 Full Name (Last, First, Middle Initial)
 Mailing Address 835 RESERVOIR AVE
 City BRIDGEPORT State CT Zip Code 06606
 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
 12 / 10 / 2013
Transaction ID : SA11AI.121047
 Amount of Each Receipt this Period
 100.00

C. MS ANNE MCGRANE 030
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 BETTY LEE TER
 City SALEM State NH Zip Code 03079
 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
 10 / 01 / 2013
Transaction ID : SA11AI.121085
 Amount of Each Receipt this Period
 100.00

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: PAGE 420 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS ANNE MCGRANE 030
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 BETTY LEE TER
 City SALEM State NH Zip Code 03079
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 18 / 2013
Transaction ID : SA11Al.121086
 Amount of Each Receipt this Period
 25.00

B. MR KEITH MCINTYRE 970
 Full Name (Last, First, Middle Initial)
 Mailing Address 11137 SE RIMROCK DR
 City HAPPY VALLEY State OR Zip Code 97086
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 30 / 2013
Transaction ID : SA11Al.121149
 Amount of Each Receipt this Period
 100.00

C. MS VIRGINIA H MCKENZIE 480
 Full Name (Last, First, Middle Initial)
 Mailing Address 57397 MEGAN DR
 City WASHINGTON State MI Zip Code 48094
 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 ▼ 220.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 30 / 2013
Transaction ID : SA11Al.121217
 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 421 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS VIRGINIA H MCKENZIE 480		Date of Receipt
Mailing Address 57397 MEGAN DR		<input type="text" value="12"/> / <input type="text" value="10"/> / <input type="text" value="2013"/>
City	State	Zip Code
WASHINGTON	MI	48094
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.121220
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="240.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="240.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MS VIRGINIA H MCKENZIE 480		Date of Receipt
Mailing Address 57397 MEGAN DR		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Zip Code
WASHINGTON	MI	48094
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.121218
<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="265.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MR DAVID R MCKENZIE 816		Date of Receipt
Mailing Address 1402 W 2ND ST		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2013"/>
City	State	Zip Code
RIFLE	CO	81650
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.121230
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="150.00"/>
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) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="195.00"/>
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 422 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MRS MARGARET MCKINLEY 870		Date of Receipt
Mailing Address 59 CANILLA LOOP		<input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2013"/>
City	State	Zip Code
BELEN	NM	87002
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.121241
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="150.00"/>
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) B. MR DUSTIN A MCKINNIES 775		Date of Receipt
Mailing Address 16802 SHADY LN		<input type="text" value="09"/> / <input type="text" value="10"/> / <input type="text" value="2013"/>
City	State	Zip Code
CHANNELVIEW	TX	77530
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.121256
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="200.00"/>
Name of Employer	Occupation	
SELF EMPLOYED	ELECTRICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="350.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MS EMILY MCLEAN 853		Date of Receipt
Mailing Address PO BOX 156		<input type="text" value="08"/> / <input type="text" value="27"/> / <input type="text" value="2013"/>
City	State	Zip Code
BUCKEYE	AZ	85326
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.121332
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<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="600.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="450.00"/>
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 423 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS EMILY MCLEAN 853			Date of Receipt
Mailing Address PO BOX 156			<input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11AI.121335
BUCKEYE	AZ	85326	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="700.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MS EMILY MCLEAN 853			Date of Receipt
Mailing Address PO BOX 156			<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11AI.121333
BUCKEYE	AZ	85326	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="800.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. MRS EMILY G MCLEAN 853			Date of Receipt
Mailing Address PO BOX 156			<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11AI.121334
BUCKEYE	AZ	85326	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="150.00"/>
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) ▼			

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: (check only one)	PAGE 424 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS JACKIE MCLEMORE 381
 Full Name (Last, First, Middle Initial)
 Mailing Address 1343 E MASSEY RD
 City MEMPHIS State TN Zip Code 38120
 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
 12 / 11 / 2013
Transaction ID : SA11AI.121345
 Amount of Each Receipt this Period
 100.00

B. MR JAMES M MCMULLEN 080
 Full Name (Last, First, Middle Initial)
 Mailing Address 15 AVENUE A
 City VINCENTOWN State NJ Zip Code 08088
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HEATING & AIR COND Occupation SELF EMPLOYED
 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
 11 / 06 / 2013
Transaction ID : SA11AI.121414
 Amount of Each Receipt this Period
 200.00

C. MS JOYCE Y MCMUTT 761
 Full Name (Last, First, Middle Initial)
 Mailing Address 7121 SUMMERSET DR
 City FORT WORTH State TX Zip Code 76126
 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
 08 / 19 / 2013
Transaction ID : SA11AI.121418
 Amount of Each Receipt this Period
 200.00

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: (check only one)	PAGE 425 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS JOYCE Y MCMUTT 761		Date of Receipt
Mailing Address 7121 SUMMERSET DR		<input type="text" value="11"/> / <input type="text" value="19"/> / <input type="text" value="2013"/>
City	State	Transaction ID : SA11Al.121419
FORT WORTH	TX	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	Zip Code	<input type="text" value="200.00"/>
C	76126	
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="600.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MRS SHERRY MCPHERSON 546		Date of Receipt
Mailing Address PO BOX 367		<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2013"/>
City	State	Transaction ID : SA11Al.121472
SPARTA	WI	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	Zip Code	<input type="text" value="500.00"/>
C	54656	
Name of Employer	Occupation	
NONE	HOMEMAKER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1100.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MRS SHERRY MCPHERSON 546		Date of Receipt
Mailing Address PO BOX 367		<input type="text" value="12"/> / <input type="text" value="25"/> / <input type="text" value="2013"/>
City	State	Transaction ID : SA11Al.121471
SPARTA	WI	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	Zip Code	<input type="text" value="500.00"/>
C	54656	
Name of Employer	Occupation	
NONE	HOMEMAKER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1600.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1200.00"/>
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 426 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR WILLIAM MCQUILLEN 019
 Full Name (Last, First, Middle Initial)
 Mailing Address 110 RUSSELL ST
 City State Zip Code
 PEABODY MA 01960
 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 ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2013
Transaction ID : SA11Al.121485
 Amount of Each Receipt this Period
 50.00

B. MR JEFF MEADOR 809
 Full Name (Last, First, Middle Initial)
 Mailing Address 2210 BENNETT AVE
 City State Zip Code
 COLORADO SPRINGS CO 80909
 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 ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 19 / 2013
Transaction ID : SA11Al.121532
 Amount of Each Receipt this Period
 220.00

C. MS NORMA J MEECE 880
 Full Name (Last, First, Middle Initial)
 Mailing Address 2296 SEDONA HILLS PKWY
 City State Zip Code
 LAS CRUCES NM 88011
 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 ▼
 575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 12 / 2013
Transaction ID : SA11Al.121586
 Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 420.00
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 427 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS NORMA J MEECE 880
Full Name (Last, First, Middle Initial)
Mailing Address 2296 SEDONA HILLS PKWY

City LAS CRUCES	State NM	Zip Code 88011
--------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
725.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2013

Transaction ID : SA11AI.121585

Amount of Each Receipt this Period
150.00

B. MS NORMA J MEECE 880
Full Name (Last, First, Middle Initial)
Mailing Address 2296 SEDONA HILLS PKWY

City LAS CRUCES	State NM	Zip Code 88011
--------------------	-------------	-------------------

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 ▼
925.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2013

Transaction ID : SA11AI.121587

Amount of Each Receipt this Period
200.00

C. MR MERLE MELTON 516
Full Name (Last, First, Middle Initial)
Mailing Address 2668 170TH ST

City SIDNEY	State IA	Zip Code 51652
----------------	-------------	-------------------

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 ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2013

Transaction ID : SA11AI.121688

Amount of Each Receipt this Period
20.00

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 428 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR MERLE MELTON 516
 Full Name (Last, First, Middle Initial)
 Mailing Address 2668 170TH ST
 City SIDNEY State IA Zip Code 51652
 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 / 19 / 2013
Transaction ID : SA11AI.121689
 Amount of Each Receipt this Period
 40.00

B. MR MERLE MELTON 516
 Full Name (Last, First, Middle Initial)
 Mailing Address 2668 170TH ST
 City SIDNEY State IA Zip Code 51652
 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 ▼ 340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2013
Transaction ID : SA11AI.121692
 Amount of Each Receipt this Period
 60.00

C. MR MERLE MELTON 516
 Full Name (Last, First, Middle Initial)
 Mailing Address 2668 170TH ST
 City SIDNEY State IA Zip Code 51652
 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 / 23 / 2013
Transaction ID : SA11AI.121693
 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 429 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR MERLE MELTON 516		Date of Receipt
Mailing Address 2668 170TH ST		<input type="text" value="11"/> / <input type="text" value="18"/> / <input type="text" value="2013"/>
City SIDNEY	State IA	Zip Code 51652
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.121691
Name of Employer NONE		Amount of Each Receipt this Period
Occupation RETIRED		<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="395.00"/>		

Full Name (Last, First, Middle Initial) B. MR MERLE MELTON 516		Date of Receipt
Mailing Address 2668 170TH ST		<input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2013"/>
City SIDNEY	State IA	Zip Code 51652
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.121690
Name of Employer NONE		Amount of Each Receipt this Period
Occupation RETIRED		<input type="text" value="60.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="455.00"/>		

Full Name (Last, First, Middle Initial) C. MS JEAN MELVIN 548		Date of Receipt
Mailing Address PO BOX 462		<input type="text" value="12"/> / <input type="text" value="06"/> / <input type="text" value="2013"/>
City CUMBERLAND	State WI	Zip Code 54829
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.121701
Name of Employer NONE		Amount of Each Receipt this Period
Occupation RETIRED		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="250.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="130.00"/>
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 430 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR RONALD E MENNE 402
 Full Name (Last, First, Middle Initial)
 Mailing Address 3021 STONEBRIDGE RD
 City LOUISVILLE State KY Zip Code 40241
 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 / 19 / 2013
Transaction ID : SA11AI.121743
 Amount of Each Receipt this Period
 50.00

B. MR RALPH W MESERVEY 646
 Full Name (Last, First, Middle Initial)
 Mailing Address 17009 LIV 204
 City CHULA State MO Zip Code 64635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 15 / 2013
Transaction ID : SA11AI.121852
 Amount of Each Receipt this Period
 225.00

C. MR RALPH W MESERVEY 646
 Full Name (Last, First, Middle Initial)
 Mailing Address 17009 LIV 204
 City CHULA State MO Zip Code 64635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2013
Transaction ID : SA11AI.121853
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00
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 431 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR RALPH W MESERVEY 646			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 18 / 2013 Transaction ID : SA11Al.121851
Mailing Address 17009 LIV 204			Amount of Each Receipt this Period 100.00
City CHULA	State MO	Zip Code 64635	
FEC ID number of contributing federal political committee. C			
Name of Employer NONE	Occupation SELF EMPLOYED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00		

Full Name (Last, First, Middle Initial) B. MR JAMES K MESSINGER 983			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 14 / 2013 Transaction ID : SA11Al.121868
Mailing Address 13926 215TH AVE E			Amount of Each Receipt this Period 25.00
City BONNEY LAKE	State WA	Zip Code 98391	
FEC ID number of contributing federal political committee. C			
Name of Employer NONE	Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00		

Full Name (Last, First, Middle Initial) C. MR JAMES K MESSINGER 983			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 15 / 2013 Transaction ID : SA11Al.121870
Mailing Address 13926 215TH AVE E			Amount of Each Receipt this Period 25.00
City BONNEY LAKE	State WA	Zip Code 98391	
FEC ID number of contributing federal political committee. C			
Name of Employer NONE	Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00		

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 432 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR CLARENCE W METTENBURG 526
 Full Name (Last, First, Middle Initial)
 Mailing Address 1610 E DEER RUN LN
 City MOUNT PLEASANT State IA Zip Code 52641
 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
 12 / 18 / 2013
Transaction ID : SA11AI.121896
 Amount of Each Receipt this Period
 125.00

B. MR FRED E MEYN 997
 Full Name (Last, First, Middle Initial)
 Mailing Address 1335 MAYA LN
 City FAIRBANKS State AK Zip Code 99712
 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
 10 / 24 / 2013
Transaction ID : SA11AI.121971
 Amount of Each Receipt this Period
 100.00

C. MR JOHN MIDKIFF 797
 Full Name (Last, First, Middle Initial)
 Mailing Address 2000 STANOLIND AVE
 City MIDLAND State TX Zip Code 79705
 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 / 19 / 2013
Transaction ID : SA11AI.122034
 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:	PAGE 433 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS MELISSA J MIGNINI 211		Date of Receipt
Mailing Address 638 ROCKY HILL RD		<input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2013"/>
City	State	Zip Code
SPARKS	MD	21152
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.122056
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	HOMEMAKER	<input type="text" value="50.00"/>
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. MS MELISSA J MIGNINI 211		Date of Receipt
Mailing Address 638 ROCKY HILL RD		<input type="text" value="11"/> / <input type="text" value="06"/> / <input type="text" value="2013"/>
City	State	Zip Code
SPARKS	MD	21152
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.122057
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	HOMEMAKER	<input type="text" value="50.00"/>
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. MS GLORIA R MILANOWSKI 827		Date of Receipt
Mailing Address 659 STATE HIGHWAY 116		<input type="text" value="07"/> / <input type="text" value="10"/> / <input type="text" value="2013"/>
City	State	Zip Code
SUNDANCE	WY	82729
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.122070
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="150.00"/>
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"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="250.00"/>
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 434 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR JOHN C MILLER 175
 Full Name (Last, First, Middle Initial)
 Mailing Address 107 E CONESTOGA ST
 City NEW HOLLAND State PA Zip Code 17557
 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 / 23 / 2013
Transaction ID : SA11AI.122140
 Amount of Each Receipt this Period
 225.00

B. MRS ROSE MARIE MILLER 186
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 338
 City DUSHORE State PA Zip Code 18614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2013
Transaction ID : SA11AI.122148
 Amount of Each Receipt this Period
 75.00

C. MS PAMELA MILLER 262
 Full Name (Last, First, Middle Initial)
 Mailing Address 414 WEAVER RD
 City ELKINS State WV Zip Code 26241
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REFUSED Occupation REFUSED
 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 / 26 / 2013
Transaction ID : SA11AI.122161
 Amount of Each Receipt this Period
 200.00

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: (check only one)	PAGE 435 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. A LAMAR MILLER 363
Full Name (Last, First, Middle Initial)
Mailing Address 115 HABERSHAM DR

City DOTHAN	State AL	Zip Code 36301
----------------	-------------	-------------------

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
11	/	07	/	2013

Transaction ID : SA11Al.122202

Amount of Each Receipt this Period
50.00

B. A LAMAR MILLER 363
Full Name (Last, First, Middle Initial)
Mailing Address 115 HABERSHAM DR

City DOTHAN	State AL	Zip Code 36301
----------------	-------------	-------------------

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
12	/	02	/	2013

Transaction ID : SA11Al.122201

Amount of Each Receipt this Period
50.00

C. DR ROBERT B MILLER 420
Full Name (Last, First, Middle Initial)
Mailing Address 6320 SAINT ANDREWS DR

City PADUCAH	State KY	Zip Code 42001
-----------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation PHYSICIAN
-----------------------------	-------------------------

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	/	31	/	2013

Transaction ID : SA11Al.122212

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 436 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. DR ROBERT B MILLER 420
 Full Name (Last, First, Middle Initial)
 Mailing Address 6320 SAINT ANDREWS DR
 City PADUCAH State KY Zip Code 42001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **355.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2013
Transaction ID : SA11AI.122213
 Amount of Each Receipt this Period
150.00

B. MS ELIZABETH A MILLER 423
 Full Name (Last, First, Middle Initial)
 Mailing Address 1002 CLAY ST
 City HARTFORD State KY Zip Code 42347
 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 / 20 / 2013
Transaction ID : SA11AI.122217
 Amount of Each Receipt this Period
200.00

C. MS ELIZABETH A MILLER 423
 Full Name (Last, First, Middle Initial)
 Mailing Address 1002 CLAY ST
 City HARTFORD State KY Zip Code 42347
 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
 12 / 11 / 2013
Transaction ID : SA11AI.122219
 Amount of Each Receipt this Period
125.00

SUBTOTAL of Receipts This Page (optional).....▶	475.00
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 437 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

A. MR PAUL MILLER 440
Full Name (Last, First, Middle Initial)

Mailing Address 15535 BURTON WINDSOR RD

City MIDDLEFIELD	State OH	Zip Code 44062
---------------------	-------------	-------------------

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

Name of Employer HONEST SALES RECYCLING	Occupation RECYCLING
--------------------------------------------	-------------------------

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
11	/	26	/	2013

Transaction ID : SA11AI.122228

Amount of Each Receipt this Period
150.00

B. MR CHARLES MILLER 535
Full Name (Last, First, Middle Initial)

Mailing Address 507 26TH AVE

City MONROE	State WI	Zip Code 53566
----------------	-------------	-------------------

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	/	21	/	2013

Transaction ID : SA11AI.122228

Amount of Each Receipt this Period
75.00

C. MR CHARLES MILLER 535
Full Name (Last, First, Middle Initial)

Mailing Address 507 26TH AVE

City MONROE	State WI	Zip Code 53566
----------------	-------------	-------------------

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
11	/	21	/	2013

Transaction ID : SA11AI.122289

Amount of Each Receipt this Period
75.00

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 438 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR MIKE MILLER 600		Date of Receipt
Mailing Address 123 W MAIN ST		<input type="text" value="08"/> / <input type="text" value="19"/> / <input type="text" value="2013"/>
City	State	Zip Code
BARRINGTON	IL	60010
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.122295
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
JEWELER	SELF EMPLOYED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="600.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MR ARTHUR O MILLER 722		Date of Receipt
Mailing Address 210 VALLEY CLUB CIR		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2013"/>
City	State	Zip Code
LITTLE ROCK	AR	72212
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.122317
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<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="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MR DOUGLAS MILLER 959		Date of Receipt
Mailing Address 714 N HUMBOLDT AVE APT 901		<input type="text" value="07"/> / <input type="text" value="11"/> / <input type="text" value="2013"/>
City	State	Zip Code
WILLOWS	CA	95988
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.122386
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="200.00"/>
Name of Employer	Occupation	
CALIFORNIA COURT	JUSTICE	
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) ▼		

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: (check only one)	PAGE 439 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR DOUGLAS MILLER 959		Date of Receipt
Mailing Address 714 N HUMBOLDT AVE APT 901		<input type="text" value="08"/> / <input type="text" value="08"/> / <input type="text" value="2013"/>
City	State	Transaction ID : SA11AI.122387
WILLOWS	CA	
Zip Code		Amount of Each Receipt this Period
95988		<input type="text" value="200.00"/>
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
CALIFORNIA COURT	JUSTICE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="600.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MR DOUGLAS MILLER 959		Date of Receipt
Mailing Address 714 N HUMBOLDT AVE APT 901		<input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2013"/>
City	State	Transaction ID : SA11AI.122393
WILLOWS	CA	
Zip Code		Amount of Each Receipt this Period
95988		<input type="text" value="200.00"/>
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
CALIFORNIA COURT	JUSTICE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="800.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MR DOUGLAS MILLER 959		Date of Receipt
Mailing Address 714 N HUMBOLDT AVE APT 901		<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2013"/>
City	State	Transaction ID : SA11AI.122391
WILLOWS	CA	
Zip Code		Amount of Each Receipt this Period
95988		<input type="text" value="200.00"/>
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
CALIFORNIA COURT	JUSTICE	
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="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: PAGE 440 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR MICHAEL A MINGOLELLI 017
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 MCCARTHY CIR
 City State Zip Code
 FRAMINGHAM MA 01702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 PINNACLE FINANCIAL GROUP FINANCIAL ADVISOR
 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
 12 / 27 / 2013
Transaction ID : SA11AI.122485
 Amount of Each Receipt this Period
 50.00

B. MR CHARLES D MISSAR 200
 Full Name (Last, First, Middle Initial)
 Mailing Address 5420 CONNECTICUT AVE NW
 City State Zip Code
 WASHINGTON DC 20015
 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
 11 / 18 / 2013
Transaction ID : SA11AI.122551
 Amount of Each Receipt this Period
 50.00

C. MS JACQUE MITCHELL 740
 Full Name (Last, First, Middle Initial)
 Mailing Address 27794 S513 W AVE
 City State Zip Code
 DEPEW OK 74028
 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 / 05 / 2013
Transaction ID : SA11AI.122609
 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: PAGE 441 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS JACQUE MITCHELL 740
 Full Name (Last, First, Middle Initial)
 Mailing Address 27794 S513 W AVE
 City DEPEW State OK Zip Code 74028
 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
 12 / 05 / 2013
Transaction ID : SA11AI.122608
 Amount of Each Receipt this Period
 100.00

B. MS CHARLOTTE K MITCHELL 766
 Full Name (Last, First, Middle Initial)
 Mailing Address 159 PRIVATE ROAD 5489
 City MEXIA State TX Zip Code 76667
 FEC ID number of contributing federal political committee. **C**
 Name of Employer E G HALL OIL CO INC Occupation DIRECTOR
 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
 07 / 05 / 2013
Transaction ID : SA11AI.122615
 Amount of Each Receipt this Period
 100.00

C. MS CHARLOTTE K MITCHELL 766
 Full Name (Last, First, Middle Initial)
 Mailing Address 159 PRIVATE ROAD 5489
 City MEXIA State TX Zip Code 76667
 FEC ID number of contributing federal political committee. **C**
 Name of Employer E G HALL OIL CO INC Occupation DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 08 / 2013
Transaction ID : SA11AI.122616
 Amount of Each Receipt this Period
 70.00

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: (check only one)	PAGE 442 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS CHARLOTTE K MITCHELL 766
 Full Name (Last, First, Middle Initial)
 Mailing Address 159 PRIVATE ROAD 5489

City MEXIA	State TX	Zip Code 76667
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FEC ID number of contributing federal political committee. **C**

Name of Employer E G HALL OIL CO INC	Occupation DIRECTOR
-----------------------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
380.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 08 / 2013
Transaction ID : SA11AI.122618

Amount of Each Receipt this Period
70.00

B. MS CHARLOTTE K MITCHELL 766
 Full Name (Last, First, Middle Initial)
 Mailing Address 159 PRIVATE ROAD 5489

City MEXIA	State TX	Zip Code 76667
---------------	-------------	-------------------

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

Name of Employer E G HALL OIL CO INC	Occupation DIRECTOR
-----------------------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
530.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2013
Transaction ID : SA11AI.122617

Amount of Each Receipt this Period
150.00

C. MR ROBERT MITTNIIGHT 121
 Full Name (Last, First, Middle Initial)
 Mailing Address 307 WEST RD

City STEPHENTOWN	State NY	Zip Code 12168
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FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation FARMER
-----------------------------	----------------------

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
 08 / 19 / 2013
Transaction ID : SA11AI.122655

Amount of Each Receipt this Period
50.00

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: (check only one)	PAGE 443 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR ROBERT MITTNIIGHT 121
 Full Name (Last, First, Middle Initial)
 Mailing Address 307 WEST RD
 City STEPHENTOWN State NY Zip Code 12168
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2013
Transaction ID : SA11AI.122656
 Amount of Each Receipt this Period
 40.00

B. JOYLENE B MOE 985
 Full Name (Last, First, Middle Initial)
 Mailing Address 110 ELMA GATE RD E
 City OAKVILLE State WA Zip Code 98568
 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
 10 / 08 / 2013
Transaction ID : SA11AI.122707
 Amount of Each Receipt this Period
 50.00

C. MR WALTER H MOFIELD 959
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 129
 City CLIPPER MILLS State CA Zip Code 95930
 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 / 04 / 2013
Transaction ID : SA11AI.122734
 Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional).....▶	240.00
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 444 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR WALTER H MOFIELD 959
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 129
 City CLIPPER MILLS State CA Zip Code 95930
 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
 10 / 04 / 2013
Transaction ID : SA11AI.122735
 Amount of Each Receipt this Period
 150.00

B. MS SUSAN C MOGER 282
 Full Name (Last, First, Middle Initial)
 Mailing Address 1351 KILLASHEE CT
 City CHARLOTTE State NC Zip Code 28213
 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
 07 / 03 / 2013
Transaction ID : SA11AI.122739
 Amount of Each Receipt this Period
 35.00

C. MS SUSAN C MOGER 282
 Full Name (Last, First, Middle Initial)
 Mailing Address 1351 KILLASHEE CT
 City CHARLOTTE State NC Zip Code 28213
 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
 M M M / D D D / Y Y Y Y Y Y
 08 / 23 / 2013
Transaction ID : SA11AI.122738
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	235.00
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 445 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR MARCIA W MONNIER 454
 Full Name (Last, First, Middle Initial)
 Mailing Address 6985 WEMBLEY CIR
 City DAYTON State OH Zip Code 45459
 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 / 22 / 2013
Transaction ID : SA11AI.122877
 Amount of Each Receipt this Period
 200.00

B. MR MARCIA W MONNIER 454
 Full Name (Last, First, Middle Initial)
 Mailing Address 6985 WEMBLEY CIR
 City DAYTON State OH Zip Code 45459
 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
 11 / 13 / 2013
Transaction ID : SA11AI.122876
 Amount of Each Receipt this Period
 200.00

C. MS INGRID MONTOYA 926
 Full Name (Last, First, Middle Initial)
 Mailing Address 25485 RUE CHANSON
 City LAGUNA NIGUEL State CA Zip Code 92677
 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 ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 15 / 2013
Transaction ID : SA11AI.122943
 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 446 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR DONALD S MOON 121
 Full Name (Last, First, Middle Initial)
 Mailing Address 1838 RIVER RD
 City WEST COXSACKIE State NY Zip Code 12192
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2013
Transaction ID : SA11AI.122963
 Amount of Each Receipt this Period
 150.00

B. MS NANCY V MOORE 193
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E MARSHALL ST APT 226
 City WEST CHESTER State PA Zip Code 19380
 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
 07 / 01 / 2013
Transaction ID : SA11AI.122978
 Amount of Each Receipt this Period
 200.00

C. MS NANCY V MOORE 193
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E MARSHALL ST APT 226
 City WEST CHESTER State PA Zip Code 19380
 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 / 12 / 2013
Transaction ID : SA11AI.122977
 Amount of Each Receipt this Period
 100.00

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: PAGE 447 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS MARIE ANNETTE MOORE 301
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 PINE DR
 City TEMPLE State GA Zip Code 30179
 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 / 05 / 2013
Transaction ID : SA11AI.122993
 Amount of Each Receipt this Period
 50.00

B. MS MARIE ANNETTE MOORE 301
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 PINE DR
 City TEMPLE State GA Zip Code 30179
 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 ▼ 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2013
Transaction ID : SA11AI.122995
 Amount of Each Receipt this Period
 100.00

C. MS MARIE ANNETTE MOORE 301
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 PINE DR
 City TEMPLE State GA Zip Code 30179
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 18 / 2013
Transaction ID : SA11AI.122994
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
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 448 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR AL MOORE 631
Full Name (Last, First, Middle Initial)
Mailing Address 9910 PAGE AVE

City SAINT LOUIS	State MO	Zip Code 63132
---------------------	-------------	-------------------

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

Name of Employer M F D	Occupation CEO
---------------------------	-------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	15	/	2013

Transaction ID : SA11Al.123035

Amount of Each Receipt this Period
1000.00

B. MR BENNETT G MOORE 773 JR
Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 11349

City SPRING	State TX	Zip Code 77391
----------------	-------------	-------------------

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
12	/	16	/	2013

Transaction ID : SA11Al.123060

Amount of Each Receipt this Period
35.00

C. MRS MARY K MOORMAN 316
Full Name (Last, First, Middle Initial)
Mailing Address 4670 KNIGHTS ACADEMY RD

City VALDOSTA	State GA	Zip Code 31605
------------------	-------------	-------------------

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

Name of Employer ADC	Occupation EXECUTIVE
-------------------------	-------------------------

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
08	/	26	/	2013

Transaction ID : SA11Al.123105

Amount of Each Receipt this Period
20.00

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: (check only one)	PAGE 449 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MRS MARY K MOORMAN 316
Full Name (Last, First, Middle Initial)

Mailing Address 4670 KNIGHTS ACADEMY RD

City VALDOSTA State GA Zip Code 31605

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

Name of Employer ADC Occupation EXECUTIVE

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 / 03 / 2013

Transaction ID : SA11AI.123101

Amount of Each Receipt this Period
50.00

B. MRS MARY K MOORMAN 316
Full Name (Last, First, Middle Initial)

Mailing Address 4670 KNIGHTS ACADEMY RD

City VALDOSTA State GA Zip Code 31605

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

Name of Employer ADC Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **470.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 05 / 2013

Transaction ID : SA11AI.123102

Amount of Each Receipt this Period
100.00

C. MRS MARY K MOORMAN 316
Full Name (Last, First, Middle Initial)

Mailing Address 4670 KNIGHTS ACADEMY RD

City VALDOSTA State GA Zip Code 31605

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

Name of Employer ADC Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **520.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 03 / 2013

Transaction ID : SA11AI.123103

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 450 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MRS MARY K MOORMAN 316
 Full Name (Last, First, Middle Initial)
 Mailing Address 4670 KNIGHTS ACADEMY RD
 City VALDOSTA State GA Zip Code 31605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ADC Occupation EXECUTIVE
 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
 12 / 20 / 2013
Transaction ID : SA11AI.123104
 Amount of Each Receipt this Period
 250.00

B. MR JOHN H MORAN 028
 Full Name (Last, First, Middle Initial)
 Mailing Address 83 SOUTH AVE
 City TIVERTON State RI Zip Code 02878
 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
 11 / 05 / 2013
Transaction ID : SA11AI.123118
 Amount of Each Receipt this Period
 100.00

C. SHARLET MORGAN 691
 Full Name (Last, First, Middle Initial)
 Mailing Address 424 S CHESTNUT ST
 City KIMBALL State NE Zip Code 69145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BROKER OWNER Occupation SELF EMPLOYED
 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 / 21 / 2013
Transaction ID : SA11AI.123198
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
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 451 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. SHARLET MORGAN 691
 Full Name (Last, First, Middle Initial)
 Mailing Address 424 S CHESTNUT ST
 City KIMBALL State NE Zip Code 69145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BROKER OWNER Occupation SELF EMPLOYED
 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
 10 / 21 / 2013
Transaction ID : SA11AI.123199
 Amount of Each Receipt this Period
 100.00

B. MICHAEL WALTER MORRIS 079
 Full Name (Last, First, Middle Initial)
 Mailing Address 52 RED GATE RD
 City MORRISTOWN State NJ Zip Code 07960
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MORRIS ASSOCIATES Occupation SELF EMPLOYED
 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 / 17 / 2013
Transaction ID : SA11AI.123250
 Amount of Each Receipt this Period
 100.00

C. DR PATRICK MORRIS 853 DC
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 867
 City YARNELL State AZ Zip Code 85362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation CHIROPRACTOR
 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
 08 / 14 / 2013
Transaction ID : SA11AI.123284
 Amount of Each Receipt this Period
 175.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00
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 452 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS FRANCES MORRISON 714		Date of Receipt
Mailing Address 147 MILLIGAN RD		<input type="text" value="12"/> / <input type="text" value="16"/> / <input type="text" value="2013"/>
City	State	Zip Code
COLFAX	LA	71417
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.123311
Name of Employer	Occupation	Amount of Each Receipt this Period
SELF EMPLOYED	CERTIFIED HEALTH COACH	<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="250.00"/>	

Full Name (Last, First, Middle Initial) B. MS EVELYN O MOTL 779		Date of Receipt
Mailing Address 504 ANGUS ST		<input type="text" value="11"/> / <input type="text" value="12"/> / <input type="text" value="2013"/>
City	State	Zip Code
VICTORIA	TX	77904
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.123445
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="250.00"/>	

Full Name (Last, First, Middle Initial) C. MS BONNIE MULCAY 298		Date of Receipt
Mailing Address 114 GRANVIEW RD		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2013"/>
City	State	Zip Code
JACKSON	SC	29831
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.123559
Name of Employer	Occupation	Amount of Each Receipt this Period
ALLEN TATE REAL ESTATE CO	REALTOR	<input type="text" value="50.00"/>
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"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="225.00"/>
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 453 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS BONNIE MULCAY 298
 Full Name (Last, First, Middle Initial)
 Mailing Address 114 GRANVIEW RD
 City JACKSON State SC Zip Code 29831
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ALLEN TATE REAL ESTATE CO Occupation REALTOR
 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
 12 / 26 / 2013
Transaction ID : SA11AI.123558
 Amount of Each Receipt this Period
 50.00

B. MS LOIS L MULLEN 850
 Full Name (Last, First, Middle Initial)
 Mailing Address 6628 W PASO TRL
 City PHOENIX State AZ Zip Code 85083
 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
 11 / 06 / 2013
Transaction ID : SA11AI.123578
 Amount of Each Receipt this Period
 100.00

C. MS MARITTA E MULLET 394
 Full Name (Last, First, Middle Initial)
 Mailing Address 508 LONGLEAF DR
 City PETAL State MS Zip Code 39465
 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
 12 / 06 / 2013
Transaction ID : SA11AI.123591
 Amount of Each Receipt this Period
 150.00

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 454 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS DOROTHY S MULLINS 382
 Full Name (Last, First, Middle Initial)
 Mailing Address 807 E STATE LINE ST
 City SOUTH FULTON State TN Zip Code 38257
 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
 10 / 14 / 2013
Transaction ID : SA11AI.123606
 Amount of Each Receipt this Period
 100.00

B. MS JOYCE E MULLINS 454
 Full Name (Last, First, Middle Initial)
 Mailing Address 7625 BERCHMAN DR
 City DAYTON State OH Zip Code 45424
 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 / 02 / 2013
Transaction ID : SA11AI.123611
 Amount of Each Receipt this Period
 300.00

C. MS JOYCE E MULLINS 454
 Full Name (Last, First, Middle Initial)
 Mailing Address 7625 BERCHMAN DR
 City DAYTON State OH Zip Code 45424
 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
 09 / 16 / 2013
Transaction ID : SA11AI.123612
 Amount of Each Receipt this Period
 50.00

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 455 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS JOYCE E MULLINS 454
 Full Name (Last, First, Middle Initial)
 Mailing Address 7625 BERCHMAN DR
 City DAYTON State OH Zip Code 45424
 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
 12 / 16 / 2013
Transaction ID : SA11AI.123610
 Amount of Each Receipt this Period
 50.00

B. MR RONALD P MUNDELL 196
 Full Name (Last, First, Middle Initial)
 Mailing Address 149 JOHNSON LN
 City READING State PA Zip Code 19605
 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 / 30 / 2013
Transaction ID : SA11AI.123637
 Amount of Each Receipt this Period
 300.00

C. MR RONALD P MUNDELL 196
 Full Name (Last, First, Middle Initial)
 Mailing Address 149 JOHNSON LN
 City READING State PA Zip Code 19605
 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 / 16 / 2013
Transaction ID : SA11AI.123636
 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 456 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS SARAH W MURPHY 212
 Full Name (Last, First, Middle Initial)
 Mailing Address 1908 INDIAN HEAD RD
 City RUXTON State MD Zip Code 21204
 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
 07 / 08 / 2013
Transaction ID : SA11AI.123726
 Amount of Each Receipt this Period
 100.00

B. MS SARAH W MURPHY 212
 Full Name (Last, First, Middle Initial)
 Mailing Address 1908 INDIAN HEAD RD
 City RUXTON State MD Zip Code 21204
 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 / 05 / 2013
Transaction ID : SA11AI.123727
 Amount of Each Receipt this Period
 100.00

C. MS MIRIAM M MYERS 726
 Full Name (Last, First, Middle Initial)
 Mailing Address 911 OVERLOOK DR
 City MOUNTAIN HOME State AR Zip Code 72653
 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
 07 / 08 / 2013
Transaction ID : SA11AI.123888
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
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 457 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS KATHY M MYERS 731
 Full Name (Last, First, Middle Initial)
 Mailing Address 201 CHERRYWOOD DR
 City State Zip Code
 MIDWEST CITY OK 73110
 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 ▼
 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2013
Transaction ID : SA11AI.123889
 Amount of Each Receipt this Period
 75.00

B. MR DONALD L MYERS 741
 Full Name (Last, First, Middle Initial)
 Mailing Address 2121 S YORKTOWN AVE APT 902
 City State Zip Code
 TULSA OK 74114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MILITARY 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 / 16 / 2013
Transaction ID : SA11AI.123891
 Amount of Each Receipt this Period
 75.00

C. MR RANDY L NACE 479
 Full Name (Last, First, Middle Initial)
 Mailing Address 10389 N US HIGHWAY 421
 City State Zip Code
 MONTICELLO IN 47960
 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
 12 / 03 / 2013
Transaction ID : SA11AI.123942
 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: PAGE 458 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS NORDYNE V NANN 956
 Full Name (Last, First, Middle Initial)
 Mailing Address 5760 STANLEY DR
 City AUBURN State CA Zip Code 95602
 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
 12 / 27 / 2013
Transaction ID : SA11AI.123983
 Amount of Each Receipt this Period
 100.00

B. DR ROBERT NASH 239 MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 31 OERTEL DR.
 City FARMVILLE State VA Zip Code 23901
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 17 / 2013
Transaction ID : SA11AI.124011
 Amount of Each Receipt this Period
 100.00

C. DR MUHAMMAD NASIR 913
 Full Name (Last, First, Middle Initial)
 Mailing Address 11987 SHOSHONE AVE
 City GRANADA HILLS State CA Zip Code 91344
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ARFLAKE REHAB MEDICAL CENTER Occupation DOCTOR
 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
 11 / 13 / 2013
Transaction ID : SA11AI.124021
 Amount of Each Receipt this Period
 200.00

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: (check only one)	PAGE 459 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR DAVID I NATION 760
Full Name (Last, First, Middle Initial)

Mailing Address 1404 BRIARWOOD BLVD

City ARLINGTON State TX Zip Code 76013

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 / 01 / 2013
Transaction ID : SA11AI.124029

Amount of Each Receipt this Period
 200.00

B. MR DAVID I NATION 760
Full Name (Last, First, Middle Initial)

Mailing Address 1404 BRIARWOOD BLVD

City ARLINGTON State TX Zip Code 76013

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
 07 / 08 / 2013
Transaction ID : SA11AI.124028

Amount of Each Receipt this Period
 50.00

C. MR DAVID I NATION 760
Full Name (Last, First, Middle Initial)

Mailing Address 1404 BRIARWOOD BLVD

City ARLINGTON State TX Zip Code 76013

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 ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 01 / 2013
Transaction ID : SA11AI.124030

Amount of Each Receipt this Period
 200.00

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:	PAGE 460 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

A. MS IRENE M NAVRATIL 604
Full Name (Last, First, Middle Initial)

Mailing Address 10720 S WASHINGTON ST APT 105

City OAK LAWN	State IL	Zip Code 60453
------------------	-------------	-------------------

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	/	26	/	2013

Transaction ID : SA11AI.124052

Amount of Each Receipt this Period
200.00

B. MS IRENE M NAVRATIL 604
Full Name (Last, First, Middle Initial)

Mailing Address 10720 S WASHINGTON ST APT 105

City OAK LAWN	State IL	Zip Code 60453
------------------	-------------	-------------------

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
10	/	14	/	2013

Transaction ID : SA11AI.124051

Amount of Each Receipt this Period
100.00

C. MS IRENE M NAVRATIL 604
Full Name (Last, First, Middle Initial)

Mailing Address 10720 S WASHINGTON ST APT 105

City OAK LAWN	State IL	Zip Code 60453
------------------	-------------	-------------------

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
11	/	20	/	2013

Transaction ID : SA11AI.124053

Amount of Each Receipt this Period
200.00

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: (check only one)	PAGE 461 OF 724
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR JAMES S NEALE 856		Date of Receipt
Mailing Address 17660 W REDROCK LN		<input type="text" value="09"/> / <input type="text" value="03"/> / <input type="text" value="2013"/>
City	State	Zip Code
MARANA	AZ	85653
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.124076
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="70.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="210.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MR JAMES S NEALE 856		Date of Receipt
Mailing Address 17660 W REDROCK LN		<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2013"/>
City	State	Zip Code
MARANA	AZ	85653
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.124075
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="70.00"/>
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. MS MARY K NEFF 660		Date of Receipt
Mailing Address 114 N SAXONY DR		<input type="text" value="11"/> / <input type="text" value="14"/> / <input type="text" value="2013"/>
City	State	Zip Code
OLATHE	KS	66061
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.124099
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<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="275.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="215.00"/>
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 462 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR JOHN T NEISES 314
 Full Name (Last, First, Middle Initial)
 Mailing Address 95 SKIDAWAY ISLAND PARK RD
 APT 404
 City SAVANNAH State GA Zip Code 31411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer JEPSON CENTER FOR THE ARTS Occupation PRESIDENT OF BOARD OF TRUSTEES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 03 / 2013
Transaction ID : SA11AI.124125
 Amount of Each Receipt this Period
 150.00

B. MR JOHN T NEISES 314
 Full Name (Last, First, Middle Initial)
 Mailing Address 95 SKIDAWAY ISLAND PARK RD
 APT 404
 City SAVANNAH State GA Zip Code 31411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer JEPSON CENTER FOR THE ARTS Occupation PRESIDENT OF BOARD OF TRUSTEES
 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 / 18 / 2013
Transaction ID : SA11AI.124126
 Amount of Each Receipt this Period
 -150.00

C. MS EVELYN F NELSON 140
 Full Name (Last, First, Middle Initial)
 Mailing Address 3614 S CREEK RD
 City HAMBURG State NY Zip Code 14075
 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 / 23 / 2013
Transaction ID : SA11AI.124138
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	100.00
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 463 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS EVELYN F NELSON 140
 Full Name (Last, First, Middle Initial)
 Mailing Address 3614 S CREEK RD
 City HAMBURG State NY Zip Code 14075
 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 / D D / Y Y Y Y Y Y
 09 / 30 / 2013
Transaction ID : SA11AI.124139
 Amount of Each Receipt this Period
 100.00

B. BETTY JEAN NELSON 521
 Full Name (Last, First, Middle Initial)
 Mailing Address 2475 RIVER RD APT 129
 City DECORAH State IA Zip Code 52101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 05 / 2013
Transaction ID : SA11AI.124156
 Amount of Each Receipt this Period
 40.00

C. BETTY JEAN NELSON 521
 Full Name (Last, First, Middle Initial)
 Mailing Address 2475 RIVER RD APT 129
 City DECORAH State IA Zip Code 52101
 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 / D D / Y Y Y Y Y Y
 08 / 07 / 2013
Transaction ID : SA11AI.124157
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
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 464 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. BETTY JEAN NELSON 521
 Full Name (Last, First, Middle Initial)
 Mailing Address 2475 RIVER RD APT 129
 City DECORAH State IA Zip Code 52101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 13 / 2013
Transaction ID : SA11AI.124160
 Amount of Each Receipt this Period
 35.00

B. BETTY JEAN NELSON 521
 Full Name (Last, First, Middle Initial)
 Mailing Address 2475 RIVER RD APT 129
 City DECORAH State IA Zip Code 52101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 17 / 2013
Transaction ID : SA11AI.124158
 Amount of Each Receipt this Period
 25.00

C. BETTY JEAN NELSON 521
 Full Name (Last, First, Middle Initial)
 Mailing Address 2475 RIVER RD APT 129
 City DECORAH State IA Zip Code 52101
 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 ▼ 380.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 25 / 2013
Transaction ID : SA11AI.124159
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00
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 465 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MRS LINDA H NEWBILL 238
 Full Name (Last, First, Middle Initial)
 Mailing Address 7313 TOWCHESTER DR
 City State Zip Code
 CHESTERFIELD VA 23832
 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 ▼
 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 20 / 2013
Transaction ID : SA11AI.124298
 Amount of Each Receipt this Period
 100.00

B. MS MARIE M NEWMAN 681
 Full Name (Last, First, Middle Initial)
 Mailing Address 715 N 163RD ST
 City State Zip Code
 OMAHA NE 68118
 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 ▼
 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 18 / 2013
Transaction ID : SA11AI.124335
 Amount of Each Receipt this Period
 35.00

C. MR JOHN J NEWTON 435
 Full Name (Last, First, Middle Initial)
 Mailing Address 7020 ERIE ST
 City State Zip Code
 SYLVANIA OH 43560
 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
 11 / 12 / 2013
Transaction ID : SA11AI.124360
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 235.00
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 466 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MRS JANE W NEWTON 973
 Full Name (Last, First, Middle Initial)
 Mailing Address 31409 PETERSON RD
 City Philomath State OR Zip Code 97370
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 15 / 2013
Transaction ID : SA11AI.124366
 Amount of Each Receipt this Period
 200.00

B. MRS JANE W NEWTON 973
 Full Name (Last, First, Middle Initial)
 Mailing Address 31409 PETERSON RD
 City Philomath State OR Zip Code 97370
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 19 / 2013
Transaction ID : SA11AI.124367
 Amount of Each Receipt this Period
 50.00

C. MR ERNEST L NICOLAY 483
 Full Name (Last, First, Middle Initial)
 Mailing Address 29875 BRADMOOR CT
 City Farmington State MI Zip Code 48334
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 05 / 2013
Transaction ID : SA11AI.124443
 Amount of Each Receipt this Period
 100.00

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: PAGE 467 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR JOHN NICOLOSI 118
 Full Name (Last, First, Middle Initial)
 Mailing Address 28 ANNE DR
 City State Zip Code
 HICKSVILLE NY 11801
 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 ▼
 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 04 / 2013
Transaction ID : SA11AI.124449
 Amount of Each Receipt this Period
 175.00

B. MR JOSEPH P NICOLUSSI 620
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 366
 City State Zip Code
 MARYVILLE IL 62062
 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 ▼
 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 06 / 2013
Transaction ID : SA11AI.124452
 Amount of Each Receipt this Period
 450.00

C. MR HENRY G NOLD 341
 Full Name (Last, First, Middle Initial)
 Mailing Address 104 CHAMONIX CT
 City State Zip Code
 NAPLES FL 34112
 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
 08 / 20 / 2013
Transaction ID : SA11AI.124595
 Amount of Each Receipt this Period
 75.00

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: PAGE 468 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR HENRY G NOLD 341
 Full Name (Last, First, Middle Initial)
 Mailing Address 104 CHAMONIX CT
 City State Zip Code
 NAPLES FL 34112
 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
 11 / 20 / 2013
Transaction ID : SA11AI.124596
 Amount of Each Receipt this Period
 75.00

B. MR ALAN G NORTHRUP 122
 Full Name (Last, First, Middle Initial)
 Mailing Address 142 LANCASTER ST
 APT 3
 City State Zip Code
 ALBANY NY 12210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 TRANSWORLD ENTERTAINMENT MANAGER
 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
 11 / 04 / 2013
Transaction ID : SA11AI.124684
 Amount of Each Receipt this Period
 50.00

C. MR ALAN G NORTHRUP 122
 Full Name (Last, First, Middle Initial)
 Mailing Address 142 LANCASTER ST
 APT 3
 City State Zip Code
 ALBANY NY 12210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 TRANSWORLD ENTERTAINMENT MANAGER
 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
 12 / 16 / 2013
Transaction ID : SA11AI.124686
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
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 469 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR WINFORD T NOWELL 018
 Full Name (Last, First, Middle Initial)
 Mailing Address 8 ROLLINS ST
 City GROVELAND State MA Zip Code 01834
 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
 11 / 13 / 2013
Transaction ID : SA11AI.124720
 Amount of Each Receipt this Period
 100.00

B. MS EDITH M NOWICKI 551
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 DEWEY ST
 City SAINT PAUL State MN Zip Code 55104
 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 / 24 / 2013
Transaction ID : SA11AI.124726
 Amount of Each Receipt this Period
 100.00

C. MS EDITH M NOWICKI 551
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 DEWEY ST
 City SAINT PAUL State MN Zip Code 55104
 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
 10 / 23 / 2013
Transaction ID : SA11AI.124724
 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 470 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. DR MAUREEN O'BRIEN 019 MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 38 CAVENDISH CIR
 City SALEM State MA Zip Code 01970
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GENERAL PRACTICE Occupation PHYSICIAN
 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
 07 / 23 / 2013
Transaction ID : SA11AI.124851
 Amount of Each Receipt this Period
 100.00

B. DR MAUREEN O'BRIEN 019 MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 38 CAVENDISH CIR
 City SALEM State MA Zip Code 01970
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GENERAL PRACTICE Occupation PHYSICIAN
 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
 12 / 10 / 2013
Transaction ID : SA11AI.124852
 Amount of Each Receipt this Period
 100.00

C. MR DERRY L O'CONNELL 129
 Full Name (Last, First, Middle Initial)
 Mailing Address 2226 STATE ROUTE 3
 City CADYVILLE State NY Zip Code 12918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation TEACHER
 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
 12 / 18 / 2013
Transaction ID : SA11AI.124881
 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 471 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS JOAN M O'CONNOR 640
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 394
 City LIBERTY State MO Zip Code 64069
 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 / 12 / 2013
Transaction ID : SA11AI.124888
 Amount of Each Receipt this Period
 250.00

B. MS NANCY OAKES 563
 Full Name (Last, First, Middle Initial)
 Mailing Address 540 17TH ST N
 City SAINT CLOUD State MN Zip Code 56303
 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 ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2013
Transaction ID : SA11AI.124810
 Amount of Each Receipt this Period
 175.00

C. MS MARY OBRIEN 648
 Full Name (Last, First, Middle Initial)
 Mailing Address 248 ELK O ZAR RD
 City LANAGAN State MO Zip Code 64847
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation UNEMPLOYED
 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
 09 / 09 / 2013
Transaction ID : SA11AI.124863
 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 472 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS MARY OBRIEN 648
 Full Name (Last, First, Middle Initial)
 Mailing Address 248 ELK O ZAR RD
 City LANAGAN State MO Zip Code 64847
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation UNEMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2013
Transaction ID : SA11AI.124862
 Amount of Each Receipt this Period
 50.00

B. MR BILLY G ODOM 765
 Full Name (Last, First, Middle Initial)
 Mailing Address 903 GILMORE ST
 City TAYLOR State TX Zip Code 76574
 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
 09 / 13 / 2013
Transaction ID : SA11AI.124922
 Amount of Each Receipt this Period
 35.00

C. MR BILLY G ODOM 765
 Full Name (Last, First, Middle Initial)
 Mailing Address 903 GILMORE ST
 City TAYLOR State TX Zip Code 76574
 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 ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2013
Transaction ID : SA11AI.124921
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00
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 473 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR JOHN L OLDENKAMP 468		Date of Receipt
Mailing Address 2209 SAINT JOE CENTER RD APT 131E		<input type="text" value="07"/> / <input type="text" value="05"/> / <input type="text" value="2013"/>
City	State	Transaction ID : SA11Al.125013
FORT WAYNE	IN	Amount of Each Receipt this Period
Zip Code		<input type="text" value="100.00"/>
46825		
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="400.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MR JOHN L OLDENKAMP 468		Date of Receipt
Mailing Address 2209 SAINT JOE CENTER RD APT 131E		<input type="text" value="08"/> / <input type="text" value="08"/> / <input type="text" value="2013"/>
City	State	Transaction ID : SA11Al.125014
FORT WAYNE	IN	Amount of Each Receipt this Period
Zip Code		<input type="text" value="100.00"/>
46825		
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="500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MR JOHN L OLDENKAMP 468		Date of Receipt
Mailing Address 2209 SAINT JOE CENTER RD APT 131E		<input type="text" value="09"/> / <input type="text" value="12"/> / <input type="text" value="2013"/>
City	State	Transaction ID : SA11Al.125016
FORT WAYNE	IN	Amount of Each Receipt this Period
Zip Code		<input type="text" value="300.00"/>
46825		
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="800.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="500.00"/>
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 474 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR JOHN L OLDENKAMP 468
 Full Name (Last, First, Middle Initial)
 Mailing Address 2209 SAINT JOE CENTER RD
 APT 131E
 City State Zip Code
 FORT WAYNE IN 46825
 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 ▼
 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 22 / 2013
Transaction ID : SA11AI.125015
 Amount of Each Receipt this Period
 100.00

B. MS ELIZABETH OLESON 522
 Full Name (Last, First, Middle Initial)
 Mailing Address 807 4TH ST
 City State Zip Code
 KALONA IA 52247
 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 / 26 / 2013
Transaction ID : SA11AI.125028
 Amount of Each Receipt this Period
 200.00

C. MS ELIZABETH OLESON 522
 Full Name (Last, First, Middle Initial)
 Mailing Address 807 4TH ST
 City State Zip Code
 KALONA IA 52247
 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 / 30 / 2013
Transaction ID : SA11AI.125029
 Amount of Each Receipt this Period
 150.00

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: PAGE 475 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS ELIZABETH OLESON 522
 Full Name (Last, First, Middle Initial)
 Mailing Address 807 4TH ST
 City KALONA State IA Zip Code 52247
 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 M / D D D / Y Y Y Y Y Y
 12 / 30 / 2013
Transaction ID : SA11AI.125027
 Amount of Each Receipt this Period
 150.00

B. MR LEROY OLSAK 769
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 60347
 City SAN ANGELO State TX Zip Code 76906
 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
 07 / 11 / 2013
Transaction ID : SA11AI.125088
 Amount of Each Receipt this Period
 50.00

C. MR LEROY OLSAK 769
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 60347
 City SAN ANGELO State TX Zip Code 76906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2013
Transaction ID : SA11AI.125089
 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 476 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. DR GEORGE W OLSON 662 DVM
 Full Name (Last, First, Middle Initial)
 Mailing Address 5206 W 80TH TER
 City PRAIRIE VILLAGE State KS Zip Code 66208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation VETERNARIAN
 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
 12 / 05 / 2013
Transaction ID : SA11AI.125118
 Amount of Each Receipt this Period
 150.00

B. MS PATRICIA A OPEL 433
 Full Name (Last, First, Middle Initial)
 Mailing Address 7845 N ST
 City RUSSELLS POINT State OH Zip Code 43348
 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 ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2013
Transaction ID : SA11AI.125201
 Amount of Each Receipt this Period
 100.00

C. MS PATRICIA A OPEL 433
 Full Name (Last, First, Middle Initial)
 Mailing Address 7845 N ST
 City RUSSELLS POINT State OH Zip Code 43348
 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2013
Transaction ID : SA11AI.125200
 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 477 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS PATRICIA A OPEL 433
 Full Name (Last, First, Middle Initial)
 Mailing Address 7845 N ST
 City State Zip Code
 RUSSELLS POINT OH 43348
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE HOMEMAKER
 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
 12 / 23 / 2013
Transaction ID : SA11AI.125202
 Amount of Each Receipt this Period
 150.00

B. MS ANA ORDONEZ 070
 Full Name (Last, First, Middle Initial)
 Mailing Address 199 TREDIAG PLACE
 City State Zip Code
 UNION NJ 07083
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 STAY AT HOME MOM HOMEMAKER
 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 / 26 / 2013
Transaction ID : SA11AI.125236
 Amount of Each Receipt this Period
 200.00

C. MS ANA ORDONEZ 070
 Full Name (Last, First, Middle Initial)
 Mailing Address 199 TREDIAG PLACE
 City State Zip Code
 UNION NJ 07083
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 STAY AT HOME MOM HOMEMAKER
 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
 11 / 26 / 2013
Transaction ID : SA11AI.125235
 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: PAGE 478 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MRS NANCY L ORME 201
 Full Name (Last, First, Middle Initial)
 Mailing Address 41284 HOGELAND MILL RD.
 City LEESBURG State VA Zip Code 20175
 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
 09 / 10 / 2013
Transaction ID : SA11AI.125261
 Amount of Each Receipt this Period
 175.00

B. MRS NANCY L ORME 201
 Full Name (Last, First, Middle Initial)
 Mailing Address 41284 HOGELAND MILL RD.
 City LEESBURG State VA Zip Code 20175
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2013
Transaction ID : SA11AI.125260
 Amount of Each Receipt this Period
 175.00

C. MS ROSEMARY ORTH 953
 Full Name (Last, First, Middle Initial)
 Mailing Address 1900 MICHEL AVE.
 City MODESTO State CA Zip Code 95358
 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 ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2013
Transaction ID : SA11AI.125305
 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: (check only one)	PAGE 479 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS ROSEMARY ORTH 953
Full Name (Last, First, Middle Initial)

Mailing Address 1900 MICHEL AVE.

City MODESTO	State CA	Zip Code 95358
-----------------	-------------	-------------------

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
12	/	05	/	2013

Transaction ID : SA11AI.125304

Amount of Each Receipt this Period
25.00

B. MS DRUCILLA B OSBORNE 863
Full Name (Last, First, Middle Initial)

Mailing Address 1215 FREMONT CT

City PRESCOTT	State AZ	Zip Code 86305
------------------	-------------	-------------------

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	/	08	/	2013

Transaction ID : SA11AI.125331

Amount of Each Receipt this Period
50.00

C. MS DRUCILLA B OSBORNE 863
Full Name (Last, First, Middle Initial)

Mailing Address 1215 FREMONT CT

City PRESCOTT	State AZ	Zip Code 86305
------------------	-------------	-------------------

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
10	/	08	/	2013

Transaction ID : SA11AI.125332

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	125.00
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 480 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR KARL OVERCASH 298
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 95

City JACKSON State SC Zip Code 29831

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 / 26 / 2013
Transaction ID : SA11AI.125428

Amount of Each Receipt this Period
 50.00

B. MR KARL OVERCASH 298
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 95

City JACKSON State SC Zip Code 29831

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
 11 / 22 / 2013
Transaction ID : SA11AI.125429

Amount of Each Receipt this Period
 50.00

C. MR DAVID H OWEN 307
Full Name (Last, First, Middle Initial)

Mailing Address 4208 OWEN RD SW

City DALTON State GA Zip Code 30720

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 / 19 / 2013
Transaction ID : SA11AI.125444

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 481 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR DAVID H OWEN 307
 Full Name (Last, First, Middle Initial)
 Mailing Address 4208 OWEN RD SW
 City DALTON State GA Zip Code 30720
 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
 12 / 19 / 2013
Transaction ID : SA11AI.125445
 Amount of Each Receipt this Period
 100.00

B. MS THERESA PADGETT 401
 Full Name (Last, First, Middle Initial)
 Mailing Address 325 KIRCHDORFER RD.
 City BRANDENBURG State KY Zip Code 40108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 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
 10 / 07 / 2013
Transaction ID : SA11AI.126130
 Amount of Each Receipt this Period
 75.00

C. MS DOLORES M PAGE 928
 Full Name (Last, First, Middle Initial)
 Mailing Address 1222 E EVERETT PL
 City ORANGE State CA Zip Code 92867
 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 ▼ 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 27 / 2013
Transaction ID : SA11AI.126174
 Amount of Each Receipt this Period
 40.00

SUBTOTAL of Receipts This Page (optional).....▶	215.00
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 482 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS PEGGY PALOMBO 707
 Full Name (Last, First, Middle Initial)
 Mailing Address 7031 BRYCE CANYON DR
 City GREENWELL SPRINGS State LA Zip Code 70739
 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 ▼ 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : SA11AI.126273
 Amount of Each Receipt this Period
 125.00

B. MS PEGGY PALOMBO 707
 Full Name (Last, First, Middle Initial)
 Mailing Address 7031 BRYCE CANYON DR
 City GREENWELL SPRINGS State LA Zip Code 70739
 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 ▼ 245.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 20 / 2013
Transaction ID : SA11AI.126274
 Amount of Each Receipt this Period
 20.00

C. MS KATHLEEN PAPPAS 292
 Full Name (Last, First, Middle Initial)
 Mailing Address 5810 KENNA DR
 City COLUMBIA State SC Zip Code 29212
 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
 08 / 05 / 2013
Transaction ID : SA11AI.126321
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 195.00
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 483 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS KATHLEEN PAPPAS 292
Full Name (Last, First, Middle Initial)

Mailing Address 5810 KENNA DR

City COLUMBIA State SC Zip Code 29212

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2013
Transaction ID : SA11AI.126323

Amount of Each Receipt this Period
 50.00

B. MS KATHLEEN PAPPAS 292
Full Name (Last, First, Middle Initial)

Mailing Address 5810 KENNA DR

City COLUMBIA State SC Zip Code 29212

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
 11 / 05 / 2013
Transaction ID : SA11AI.126322

Amount of Each Receipt this Period
 50.00

C. MS BETTY J PARAMORE 229
Full Name (Last, First, Middle Initial)

Mailing Address 567 EDWARDIAN LN

City WAYNESBORO State VA Zip Code 22980

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 ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 25 / 2013
Transaction ID : SA11AI.126337

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 484 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS BETTY J PARAMORE 229
 Full Name (Last, First, Middle Initial)
 Mailing Address 567 EDWARDIAN LN
 City WAYNESBORO State VA Zip Code 22980
 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 ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2013
Transaction ID : SA11AI.126338
 Amount of Each Receipt this Period
 100.00

B. MS YVONNE PARCHMAN 452
 Full Name (Last, First, Middle Initial)
 Mailing Address 639 WATCH HILL LN
 City CINCINNATI State OH Zip Code 45230
 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 / 2013
Transaction ID : SA11AI.126348
 Amount of Each Receipt this Period
 100.00

C. MR JOHN PARISH 853
 Full Name (Last, First, Middle Initial)
 Mailing Address 4112 S AVENUE 5 1/2 E
 City YUMA State AZ Zip Code 85365
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation REVERAND
 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 / 2013
Transaction ID : SA11AI.126372
 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 485 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR JOHN PARISH 853
Full Name (Last, First, Middle Initial)

Mailing Address 4112 S AVENUE 5 1/2 E

City YUMA State AZ Zip Code 85365

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

Name of Employer SELF EMPLOYED Occupation REVERAND

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
 11 / 08 / 2013
Transaction ID : SA11AI.126373

Amount of Each Receipt this Period
 100.00

B. MS JULIA E PARK 371
Full Name (Last, First, Middle Initial)

Mailing Address 105 MASON ST APT D

City PORTLAND State TN Zip Code 37148

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
 11 / 22 / 2013
Transaction ID : SA11AI.126380

Amount of Each Receipt this Period
 50.00

C. MR JAMES L PARKS 730
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 30240

City EDMOND State OK Zip Code 73003

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

Name of Employer JAMES L PARKS OIL AND GAS Occupation SELF EMPLOYED

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 / 11 / 2013
Transaction ID : SA11AI.126450

Amount of Each Receipt this Period
 300.00

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: PAGE 486 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR JAMES L PARKS 730
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 30240
 City EDMOND State OK Zip Code 73003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer JAMES L PARKS OIL AND GAS Occupation SELF EMPLOYED
 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
 11 / 11 / 2013
Transaction ID : SA11Al.126451
 Amount of Each Receipt this Period
 100.00

B. MR JAMES L PARKS 730
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 30240
 City EDMOND State OK Zip Code 73003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer JAMES L PARKS OIL AND GAS Occupation SELF EMPLOYED
 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
 11 / 21 / 2013
Transaction ID : SA11Al.126452
 Amount of Each Receipt this Period
 100.00

C. MS MARY K PARRISH 721
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 SUGAR CRK CT
 City NORTH LITTLE ROCK State AR Zip Code 72116
 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
 07 / 09 / 2013
Transaction ID : SA11Al.126520
 Amount of Each Receipt this Period
 125.00

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 487 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS MARY K PARRISH 721
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 SUGAR CRK CT
 City NORTH LITTLE ROCK State AR Zip Code 72116
 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
 10 / 09 / 2013
Transaction ID : SA11AI.126521
 Amount of Each Receipt this Period
 125.00

B. MS MARY K PARRISH 721
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 SUGAR CRK CT
 City NORTH LITTLE ROCK State AR Zip Code 72116
 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
 10 / 14 / 2013
Transaction ID : SA11AI.126522
 Amount of Each Receipt this Period
 150.00

C. MS MARGARET POOLE PARROTT 275
 Full Name (Last, First, Middle Initial)
 Mailing Address 212 NEEDWILL CT
 City KNIGHTDALE State NC Zip Code 27545
 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 / 15 / 2013
Transaction ID : SA11AI.126531
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional).....▶	310.00
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 488 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS MARGARET POOLE PARROTT 275
 Full Name (Last, First, Middle Initial)
 Mailing Address 212 NEEDWILL CT
 City KNIGHTDALE State NC Zip Code 27545
 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
 10 / 07 / 2013
Transaction ID : SA11AI.126533
 Amount of Each Receipt this Period
 50.00

B. MS MARGARET POOLE PARROTT 275
 Full Name (Last, First, Middle Initial)
 Mailing Address 212 NEEDWILL CT
 City KNIGHTDALE State NC Zip Code 27545
 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
 12 / 05 / 2013
Transaction ID : SA11AI.126532
 Amount of Each Receipt this Period
 30.00

C. MR MERRILL PARSONS 616
 Full Name (Last, First, Middle Initial)
 Mailing Address 5404 N WEAVERRIDGE BLVD
 City PEORIA State IL Zip Code 61615
 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 / 22 / 2013
Transaction ID : SA11AI.126549
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 180.00
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 489 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS MABEL E PATE 626
 Full Name (Last, First, Middle Initial)
 Mailing Address 1756 MURRAYVILLE RD
 City MURRAYVILLE State IL Zip Code 62668
 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
 12 / 18 / 2013
Transaction ID : SA11AI.126606
 Amount of Each Receipt this Period
 25.00

B. MS THERESA M PATE 777
 Full Name (Last, First, Middle Initial)
 Mailing Address 1185 GOLDBOROUGH DR
 City BEAUMONT State TX Zip Code 77707
 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 / 14 / 2013
Transaction ID : SA11AI.126612
 Amount of Each Receipt this Period
 150.00

C. MS THERESA M PATE 777
 Full Name (Last, First, Middle Initial)
 Mailing Address 1185 GOLDBOROUGH DR
 City BEAUMONT State TX Zip Code 77707
 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
 10 / 07 / 2013
Transaction ID : SA11AI.126613
 Amount of Each Receipt this Period
 100.00

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 490 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS DENISE A PATTERSON 070		Date of Receipt
Mailing Address 23 BALL AVE		<input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2013"/>
City	State	Zip Code
PASSAIC	NJ	07055
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.126643
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	HOMEMAKER	<input type="text" value="175.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="275.00"/>	

Full Name (Last, First, Middle Initial) B. MR RONALD PATTERSON 227		Date of Receipt
Mailing Address 13376 DUTCH HOLLOW RD		<input type="text" value="07"/> / <input type="text" value="19"/> / <input type="text" value="2013"/>
City	State	Zip Code
CULPEPER	VA	22701
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.126649
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="275.00"/>	

Full Name (Last, First, Middle Initial) C. MR RONALD PATTERSON 227		Date of Receipt
Mailing Address 13376 DUTCH HOLLOW RD		<input type="text" value="09"/> / <input type="text" value="06"/> / <input type="text" value="2013"/>
City	State	Zip Code
CULPEPER	VA	22701
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.126651
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="50.00"/>
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="325.00"/>
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 491 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR RONALD PATTERSON 227
 Full Name (Last, First, Middle Initial)
 Mailing Address 13376 DUTCH HOLLOW RD
 City CULPEPER State VA Zip Code 22701
 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
 12 / 16 / 2013
Transaction ID : SA11AI.126650
 Amount of Each Receipt this Period
 250.00

B. MS BILLIE G PATTERSON 853
 Full Name (Last, First, Middle Initial)
 Mailing Address 17444 N DEL WEBB BLVD
 City SUN CITY State AZ Zip Code 85373
 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
 12 / 24 / 2013
Transaction ID : SA11AI.126688
 Amount of Each Receipt this Period
 250.00

C. MR DAVID PAULING 934
 Full Name (Last, First, Middle Initial)
 Mailing Address 4252 RIGEL AVE
 City LOMPOC State CA Zip Code 93436
 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
 10 / 14 / 2013
Transaction ID : SA11AI.126732
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional).....▶	305.00
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 492 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR DOUGLAS R PAYNE 970
 Full Name (Last, First, Middle Initial)
 Mailing Address 27695 SE SUNRAY DR
 City BORING State OR Zip Code 97009
 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 / 30 / 2013
Transaction ID : SA11AI.126815
 Amount of Each Receipt this Period
 100.00

B. MR DOUGLAS R PAYNE 970
 Full Name (Last, First, Middle Initial)
 Mailing Address 27695 SE SUNRAY DR
 City BORING State OR Zip Code 97009
 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
 10 / 30 / 2013
Transaction ID : SA11AI.126816
 Amount of Each Receipt this Period
 100.00

C. MS KAREN PEACOCK 984
 Full Name (Last, First, Middle Initial)
 Mailing Address 1102 N OAKES ST
 City TACOMA State WA Zip Code 98406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 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
 12 / 26 / 2013
Transaction ID : SA11AI.126836
 Amount of Each Receipt this Period
 75.00

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 493 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR WARREN PEARL 038
 Full Name (Last, First, Middle Initial)
 Mailing Address 37 ALDER ST
 City EXETER State NH Zip Code 03833
 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 / 12 / 2013
Transaction ID : SA11AI.126857
 Amount of Each Receipt this Period
 150.00

B. MR WARREN PEARL 038
 Full Name (Last, First, Middle Initial)
 Mailing Address 37 ALDER ST
 City EXETER State NH Zip Code 03833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2013
Transaction ID : SA11AI.126858
 Amount of Each Receipt this Period
 25.00

C. JAMES E PEARSALL 234
 Full Name (Last, First, Middle Initial)
 Mailing Address 5432 TODD ST
 City VIRGINIA BEACH State VA Zip Code 23464
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 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 / 12 / 2013
Transaction ID : SA11AI.126861
 Amount of Each Receipt this Period
 150.00

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: PAGE 494 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. JAMES E PEARSALL 234
 Full Name (Last, First, Middle Initial)
 Mailing Address 5432 TODD ST
 City VIRGINIA BEACH State VA Zip Code 23464
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 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 / 12 / 2013
Transaction ID : SA11AI.126862
 Amount of Each Receipt this Period
 100.00

B. MR DAVID A PEDERSON 583
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 250
 City ROLLA State ND Zip Code 58367
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation 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
 07 / 10 / 2013
Transaction ID : SA11AI.126921
 Amount of Each Receipt this Period
 50.00

C. MR DAVID A PEDERSON 583
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 250
 City ROLLA State ND Zip Code 58367
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation FARMER
 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 / 29 / 2013
Transaction ID : SA11AI.126923
 Amount of Each Receipt this Period
 100.00

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 495 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR DAVID A PEDERSON 583
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 250
 City ROLLA State ND Zip Code 58367
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation FARMER
 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
10 / 29 / 2013
Transaction ID : SA11AI.126922
 Amount of Each Receipt this Period
100.00

B. MR WILLIAM PEOSCHL 949
 Full Name (Last, First, Middle Initial)
 Mailing Address 40 TWAIN HARTE LN
 City SAN RAFAEL State CA Zip Code 94901
 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 / 03 / 2013
Transaction ID : SA11AI.127068
 Amount of Each Receipt this Period
250.00

C. MR WILLIAM PEOSCHL 949
 Full Name (Last, First, Middle Initial)
 Mailing Address 40 TWAIN HARTE LN
 City SAN RAFAEL State CA Zip Code 94901
 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
09 / 18 / 2013
Transaction ID : SA11AI.127069
 Amount of Each Receipt this Period
150.00

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 496 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR WILLIAM PEOSCHL 949
 Full Name (Last, First, Middle Initial)
 Mailing Address 40 TWAIN HARTE LN
 City SAN RAFAEL State CA Zip Code 94901
 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 ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 18 / 2013
Transaction ID : SA11AI.127067
 Amount of Each Receipt this Period
 150.00

B. MS SUSAN M PEREGOY 174
 Full Name (Last, First, Middle Initial)
 Mailing Address 1150 SOUTHERN RD
 City YORK State PA Zip Code 17403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer EASTERN SCHOOL DISTRICT Occupation SUBSTITUTE TEACHER
 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 / 2013
Transaction ID : SA11AI.127087
 Amount of Each Receipt this Period
 50.00

C. MS SUSAN M PEREGOY 174
 Full Name (Last, First, Middle Initial)
 Mailing Address 1150 SOUTHERN RD
 City YORK State PA Zip Code 17403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer EASTERN SCHOOL DISTRICT Occupation SUBSTITUTE TEACHER
 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
 10 / 08 / 2013
Transaction ID : SA11AI.127088
 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 497 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR GEORGE C PERREAULT 342
 Full Name (Last, First, Middle Initial)
 Mailing Address 7336 CAPTAIN KIDD AVE
 City SARASOTA State FL Zip Code 34231
 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 / 12 / 2013
Transaction ID : SA11AI.127168
 Amount of Each Receipt this Period
 100.00

B. MR GEORGE C PERREAULT 342
 Full Name (Last, First, Middle Initial)
 Mailing Address 7336 CAPTAIN KIDD AVE
 City SARASOTA State FL Zip Code 34231
 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 M / D D D / Y Y Y Y Y Y
 11 / 18 / 2013
Transaction ID : SA11AI.127167
 Amount of Each Receipt this Period
 200.00

C. MR GEORGE C PERREAULT 342
 Full Name (Last, First, Middle Initial)
 Mailing Address 7336 CAPTAIN KIDD AVE
 City SARASOTA State FL Zip Code 34231
 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 ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2013
Transaction ID : SA11AI.127166
 Amount of Each Receipt this Period
 100.00

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: (check only one)	PAGE 498 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS LORETTA J PERRY 801
 Full Name (Last, First, Middle Initial)
 Mailing Address 7786 S ELIZABETH CT
 City CENTENNIAL State CO Zip Code 80122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation FARMER
 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 / 01 / 2013
Transaction ID : SA11AI.127211
 Amount of Each Receipt this Period
 50.00

B. MS MARY PERUGINI 468
 Full Name (Last, First, Middle Initial)
 Mailing Address 2706 RIDGE VALLEY DR
 City FORT WAYNE State IN Zip Code 46804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PERUGINI MORTGAGE CO Occupation MORTGAGE BROKER
 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 / 12 / 2013
Transaction ID : SA11AI.127226
 Amount of Each Receipt this Period
 75.00

C. MS MARY PERUGINI 468
 Full Name (Last, First, Middle Initial)
 Mailing Address 2706 RIDGE VALLEY DR
 City FORT WAYNE State IN Zip Code 46804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PERUGINI MORTGAGE CO Occupation MORTGAGE BROKER
 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
 10 / 14 / 2013
Transaction ID : SA11AI.127225
 Amount of Each Receipt this Period
 75.00

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 499 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS MARY PERUGINI 468		Date of Receipt
Mailing Address 2706 RIDGE VALLEY DR		<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2013"/>
City State Zip Code FORT WAYNE IN 46804		Transaction ID : SA11AI.127224
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="-75.00"/>
Name of Employer PERUGINI MORTGAGE CO	Occupation MORTGAGE BROKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="225.00"/>	

Full Name (Last, First, Middle Initial) B. MRS JOAN L PETERSEN 336		Date of Receipt
Mailing Address 715 W PLYMOUTH ST		<input type="text" value="08"/> / <input type="text" value="13"/> / <input type="text" value="2013"/>
City State Zip Code TAMPA FL 33603		Transaction ID : SA11AI.127284
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer NONE	Occupation RETIRED	
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"/>	

Full Name (Last, First, Middle Initial) C. MRS JOAN L PETERSEN 336		Date of Receipt
Mailing Address 715 W PLYMOUTH ST		<input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2013"/>
City State Zip Code TAMPA FL 33603		Transaction ID : SA11AI.127285
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer NONE	Occupation 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"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="125.00"/>
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 500 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR CARL PETERSEN 980
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 59944
 City RENTON State WA Zip Code 98058
 FEC ID number of contributing federal political committee. **C**
 Name of Employer THE BOEING COMPANY Occupation HVAC TECHNICIAN
 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 / 26 / 2013
Transaction ID : SA11AI.127300
 Amount of Each Receipt this Period
 100.00

B. MR CARL PETERSEN 980
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 59944
 City RENTON State WA Zip Code 98058
 FEC ID number of contributing federal political committee. **C**
 Name of Employer THE BOEING COMPANY Occupation HVAC TECHNICIAN
 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 / 27 / 2013
Transaction ID : SA11AI.127301
 Amount of Each Receipt this Period
 75.00

C. MR HOWARD W PETTENGILL 329 JR
 Full Name (Last, First, Middle Initial)
 Mailing Address 2015 CANTERBURY DR
 City INDIALANTIC State FL Zip Code 32903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RADIOLOGY ASSOC OF BROWAR Occupation RADIOLOGIST
 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 / 11 / 2013
Transaction ID : SA11AI.127404
 Amount of Each Receipt this Period
 100.00

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 501 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR HOWARD W PETTENGILL 329 JR
 Full Name (Last, First, Middle Initial)
 Mailing Address 2015 CANTERBURY DR
 City INDIALANTIC State FL Zip Code 32903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RADIOLOGY ASSOC OF BROWAR Occupation RADIOLOGIST
 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
 10 / 10 / 2013
Transaction ID : SA11Al.127405
 Amount of Each Receipt this Period
 100.00

B. ANNA LEE PETTY 787
 Full Name (Last, First, Middle Initial)
 Mailing Address 236 CEDAR HURST LN
 City AUSTIN State TX Zip Code 78734
 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
 11 / 27 / 2013
Transaction ID : SA11Al.127427
 Amount of Each Receipt this Period
 100.00

C. MS KAREN PHILLIPS 641
 Full Name (Last, First, Middle Initial)
 Mailing Address 10812 N DONNELLY CT
 City KANSAS CITY State MO Zip Code 64157
 FEC ID number of contributing federal political committee. **C**
 Name of Employer COUNTY HOME BAKERS 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
 10 / 07 / 2013
Transaction ID : SA11Al.127527
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional).....▶	230.00
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 502 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR EARL PHILLIPS 829
 Full Name (Last, First, Middle Initial)
 Mailing Address 113 COMMERCE DR
 STE C
 City EVANSTON State WY Zip Code 82930
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 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
 10 / 23 / 2013
Transaction ID : SA11AI.127552
 Amount of Each Receipt this Period
 100.00

B. MS MARGIE PIERCE 601
 Full Name (Last, First, Middle Initial)
 Mailing Address 7759 S MALTA RD
 City DEKALB State IL Zip Code 60115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer STONEHILL COLLEGE Occupation PROFESSOR
 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
 12 / 12 / 2013
Transaction ID : SA11AI.127633
 Amount of Each Receipt this Period
 125.00

C. MR WILLIAM C PIERSON 787
 Full Name (Last, First, Middle Initial)
 Mailing Address 4001 BLUFFRIDGE CIR
 City AUSTIN State TX Zip Code 78759
 FEC ID number of contributing federal political committee. **C**
 Name of Employer US MILITARY Occupation CIVIL SERVANT
 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
 11 / 06 / 2013
Transaction ID : SA11AI.127669
 Amount of Each Receipt this Period
 60.00

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 503 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS GINGER L PIETRZAK 240
 Full Name (Last, First, Middle Initial)
 Mailing Address 5250 HUNTING HILLS DR
 City ROANOKE State VA Zip Code 24018
 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
 11 / 27 / 2013
Transaction ID : SA11AI.127678
 Amount of Each Receipt this Period
 50.00

B. MS GINGER L PIETRZAK 240
 Full Name (Last, First, Middle Initial)
 Mailing Address 5250 HUNTING HILLS DR
 City ROANOKE State VA Zip Code 24018
 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 / D D / Y Y Y Y Y
 12 / 10 / 2013
Transaction ID : SA11AI.127677
 Amount of Each Receipt this Period
 150.00

C. MR VERNON D PILSING 633
 Full Name (Last, First, Middle Initial)
 Mailing Address 27 KINGSPONTE CT
 City SAINT PETERS State MO Zip Code 63376
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 12 / 2013
Transaction ID : SA11AI.127709
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
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 504 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR VERNON D PILSING 633
 Full Name (Last, First, Middle Initial)
 Mailing Address 27 KINGSPONTE CT
 City SAINT PETERS State MO Zip Code 63376
 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 ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2013
Transaction ID : SA11AI.127710
 Amount of Each Receipt this Period
 200.00

B. JOHN PINGREE 019
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 580
 City HAMILTON State MA Zip Code 01936
 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 / 16 / 2013
Transaction ID : SA11AI.127728
 Amount of Each Receipt this Period
 100.00

C. MS FAITH PINKERTON 730
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 644
 City PAULS VALLEY State OK Zip Code 73075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REFUSED Occupation REFUSED
 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
 10 / 04 / 2013
Transaction ID : SA11AI.127735
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 800.00
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 505 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR HARLEY L PINON 760
 Full Name (Last, First, Middle Initial)
 Mailing Address 309 FAIRFIELD LN
 City VENUS State TX Zip Code 76084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer JOHNATHAN MARK HOMES BUILDER Occupation CONTRACTOR
 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
 11 / 04 / 2013
Transaction ID : SA11Al.127747
 Amount of Each Receipt this Period
 100.00

B. MR CHARLES J PIPER 115
 Full Name (Last, First, Middle Initial)
 Mailing Address 77 DOUGLAS DR
 City EAST MEADOW State NY Zip Code 11554
 FEC ID number of contributing federal political committee. **C**
 Name of Employer A HOLLY PATTERSON GERIATRIC CENTER Occupation EXECUTIVE
 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 / 09 / 2013
Transaction ID : SA11Al.127755
 Amount of Each Receipt this Period
 300.00

C. MS PHYLLIS B PITCAIRN 190
 Full Name (Last, First, Middle Initial)
 Mailing Address 2582 HALLOWELL RD
 City HUNTINGDON VY State PA Zip Code 19006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 12 / 2013
Transaction ID : SA11Al.127777
 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 506 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS PHYLLIS B PITCAIRN 190
 Full Name (Last, First, Middle Initial)
 Mailing Address 2582 HALLOWELL RD
 City HUNTINGDON VY State PA Zip Code 19006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 11 / 2013
Transaction ID : SA11AI.127776
 Amount of Each Receipt this Period
 100.00

B. MS PHYLLIS B PITCAIRN 190
 Full Name (Last, First, Middle Initial)
 Mailing Address 2582 HALLOWELL RD
 City HUNTINGDON VY State PA Zip Code 19006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 14 / 2013
Transaction ID : SA11AI.127775
 Amount of Each Receipt this Period
 100.00

C. MR JOHN E PITTMAN 780
 Full Name (Last, First, Middle Initial)
 Mailing Address 9738 COUNTY ROAD 5723
 City CASTROVILLE State TX Zip Code 78009
 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
 10 / 24 / 2013
Transaction ID : SA11AI.127804
 Amount of Each Receipt this Period
 175.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00
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 507 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS CAROL PITTS 683
 Full Name (Last, First, Middle Initial)
 Mailing Address 14200 SALTILLO RD
 City BENNET State NE Zip Code 68317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 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 / 04 / 2013
Transaction ID : SA11AI.127811
 Amount of Each Receipt this Period
 150.00

B. MS LELA PIVONKA 778
 Full Name (Last, First, Middle Initial)
 Mailing Address 2503 COUNTY ROAD 100
 City CALDWELL State TX Zip Code 77836
 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 ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2013
Transaction ID : SA11AI.127820
 Amount of Each Receipt this Period
 100.00

C. MS LELA PIVONKA 778
 Full Name (Last, First, Middle Initial)
 Mailing Address 2503 COUNTY ROAD 100
 City CALDWELL State TX Zip Code 77836
 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 ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2013
Transaction ID : SA11AI.127822
 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: (check only one)	PAGE 508 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR ROBERT A PLOZAY 064
Full Name (Last, First, Middle Initial)

Mailing Address 1182 MOUNT VERNON RD

City SOUTHINGTON State CT Zip Code 06489

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
 09 / 13 / 2013
Transaction ID : SA11AI.127884

Amount of Each Receipt this Period
 100.00

B. MR NOAH T POFF 240
Full Name (Last, First, Middle Initial)

Mailing Address 466 TOMAHAWK DR

City CHRISTIANSBURG State VA Zip Code 24073

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

Name of Employer RIVERBEND WATER COMPANY Occupation SELF EMPLOYED

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 / 14 / 2013
Transaction ID : SA11AI.127936

Amount of Each Receipt this Period
 100.00

C. MS BARBARA POKORNEY 707
Full Name (Last, First, Middle Initial)

Mailing Address 6140 MORGAN RD

City GREENWELL SPRINGS State LA Zip Code 70739

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 / 05 / 2013
Transaction ID : SA11AI.127946

Amount of Each Receipt this Period
 75.00

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: PAGE 509 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS BARBARA POKORNEY 707
 Full Name (Last, First, Middle Initial)
 Mailing Address 6140 MORGAN RD
 City GREENWELL SPRINGS State LA Zip Code 70739
 Date of Receipt: 12 / 05 / 2013
 Transaction ID : SA11AI.127947
 Amount of Each Receipt this Period: 75.00
 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

B. MR LARRY POPPLEWELL 752
 Full Name (Last, First, Middle Initial)
 Mailing Address 7328 KIRKHAM DR
 City DALLAS State TX Zip Code 75252
 Date of Receipt: 09 / 30 / 2013
 Transaction ID : SA11AI.128064
 Amount of Each Receipt this Period: 50.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: RETIRED Occupation: TEACHER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date: 400.00

C. MR LARRY POPPLEWELL 752
 Full Name (Last, First, Middle Initial)
 Mailing Address 7328 KIRKHAM DR
 City DALLAS State TX Zip Code 75252
 Date of Receipt: 12 / 30 / 2013
 Transaction ID : SA11AI.128063
 Amount of Each Receipt this Period: 50.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: RETIRED Occupation: TEACHER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date: 450.00

SUBTOTAL of Receipts This Page (optional).....▶ 175.00
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 510 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS RUTH POSEY 730
Full Name (Last, First, Middle Initial)
Mailing Address 2105 NW 155TH ST
City EDMOND State OK Zip Code 73013
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 12 / 2013
Transaction ID : SA11AI.128120
Amount of Each Receipt this Period
50.00

B. MS PATRICIA A POSEY 766
Full Name (Last, First, Middle Initial)
Mailing Address 114 GARLAND DR
City HILLSBORO State TX Zip Code 76645
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 / D D / Y Y Y Y Y Y
07 / 01 / 2013
Transaction ID : SA11AI.128121
Amount of Each Receipt this Period
225.00

C. DR BOB POTEAT 293 MD
Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 160639
City BOILING SPRINGS State SC Zip Code 29316
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF EMPLOYED Occupation ANESTHESIOLOGIST
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
10 / 29 / 2013
Transaction ID : SA11AI.128135
Amount of Each Receipt this Period
75.00

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: PAGE 511 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR THOMAS POTTMEYER 911
 Full Name (Last, First, Middle Initial)
 Mailing Address 903 S OAKLAND AVE
 City PASADENA State CA Zip Code 91106
 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
 12 / 23 / 2013
Transaction ID : SA11AI.128165
 Amount of Each Receipt this Period
 225.00

B. MS COY M POWELL 977
 Full Name (Last, First, Middle Initial)
 Mailing Address 2500 SW 83RD ST
 City REDMOND State OR Zip Code 97756
 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 / 30 / 2013
Transaction ID : SA11AI.128221
 Amount of Each Receipt this Period
 75.00

C. MS COY M POWELL 977
 Full Name (Last, First, Middle Initial)
 Mailing Address 2500 SW 83RD ST
 City REDMOND State OR Zip Code 97756
 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
 12 / 04 / 2013
Transaction ID : SA11AI.128220
 Amount of Each Receipt this Period
 75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00
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 512 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS VICTORIA S PRATT 443
 Full Name (Last, First, Middle Initial)
 Mailing Address 929 STURBRIDGE DR
 City AKRON State OH Zip Code 44313
 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 / 24 / 2013
Transaction ID : SA11AI.128264
 Amount of Each Receipt this Period
 50.00

B. MS VICTORIA S PRATT 443
 Full Name (Last, First, Middle Initial)
 Mailing Address 929 STURBRIDGE DR
 City AKRON State OH Zip Code 44313
 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
 10 / 10 / 2013
Transaction ID : SA11AI.128265
 Amount of Each Receipt this Period
 50.00

C. MS VICTORIA S PRATT 443
 Full Name (Last, First, Middle Initial)
 Mailing Address 929 STURBRIDGE DR
 City AKRON State OH Zip Code 44313
 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
 11 / 19 / 2013
Transaction ID : SA11AI.128263
 Amount of Each Receipt this Period
 50.00

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 513 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS ANITA M PRIBYL 641
 Full Name (Last, First, Middle Initial)
 Mailing Address 4813 LEES SUMMIT RD
 City KANSAS CITY State MO Zip Code 64136
 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
 M M / D D / Y Y Y Y Y
 12 / 03 / 2013
Transaction ID : SA11AI.128350
 Amount of Each Receipt this Period
 250.00

B. MS BUNNY C PRICE 079
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 807
 City FAR HILLS State NJ Zip Code 07931
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 26 / 2013
Transaction ID : SA11AI.128353
 Amount of Each Receipt this Period
 100.00

C. DR CONNIE PRINCE 370
 Full Name (Last, First, Middle Initial)
 Mailing Address 105 STERLING OAKS CT
 City BRENTWOOD State TN Zip Code 37027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation DOCTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 07 / 2013
Transaction ID : SA11AI.128398
 Amount of Each Receipt this Period
 100.00

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:	PAGE 514 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

A. DR CONNIE PRINCE 370

Full Name (Last, First, Middle Initial)
Mailing Address 105 STERLING OAKS CT

City BRENWOOD State TN Zip Code 37027

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

Name of Employer SELF EMPLOYED Occupation DOCTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **475.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 21 / 2013

Transaction ID : SA11Al.128397

Amount of Each Receipt this Period
25.00

B. MR JAMES PRINCE 380

Full Name (Last, First, Middle Initial)
Mailing Address 1521 MARVIN CHAPEL RD

City BROWNSVILLE State TN Zip Code 38012

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

Name of Employer PRINCE SOD FARM Occupation FARMER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 28 / 2013

Transaction ID : SA11Al.128399

Amount of Each Receipt this Period
300.00

C. MS SUZANNE PROCTOR 046

Full Name (Last, First, Middle Initial)
Mailing Address 21 MADDOCKS AVE

City ELLSWORTH State ME Zip Code 04605

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 / 2013

Transaction ID : SA11Al.128436

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional).....▶	355.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 515 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MRS LORIE J PRUITT 780		Date of Receipt
Mailing Address 1160 W CR 314		<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2013"/>
City	State	Zip Code
CHARLOTTE	TX	78011
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : SA11Al.128474
SELF EMPLOYED	RANCHER	
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="270.00"/>	<input type="text" value="250.00"/>

Full Name (Last, First, Middle Initial) B. MS ADELAIDE M PUELZL 109		Date of Receipt
Mailing Address 21 FOXBURN ST		<input type="text" value="09"/> / <input type="text" value="03"/> / <input type="text" value="2013"/>
City	State	Zip Code
NEW CITY	NY	10956
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : SA11Al.128505
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="150.00"/>

Full Name (Last, First, Middle Initial) C. MS PAULA PULLINS 433		Date of Receipt
Mailing Address 9381 SNAPPTOWN RD		<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2013"/>
City	State	Zip Code
QUINCY	OH	43343
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : SA11Al.128532
PULLINS FARM	FARMER	
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="550.00"/>	<input type="text" value="100.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="500.00"/>
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 516 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS PAULA PULLINS 433
Full Name (Last, First, Middle Initial)

Mailing Address 9381 SNAPPTOWN RD

City QUINCY	State OH	Zip Code 43343
----------------	-------------	-------------------

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

Name of Employer PULLINS FARM	Occupation FARMER
----------------------------------	----------------------

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
12	/	16	/	2013

Transaction ID : SA11AI.128531

Amount of Each Receipt this Period

100.00

B. MR TERRY A PURSLEY 373
Full Name (Last, First, Middle Initial)

Mailing Address 231 SERENA DR

City HIXSON	State TN	Zip Code 37343
----------------	-------------	-------------------

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

Name of Employer LANDSCAPE CREATIONS	Occupation LANDSCAPER
-----------------------------------------	--------------------------

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
11	/	22	/	2013

Transaction ID : SA11AI.128566

Amount of Each Receipt this Period

150.00

C. MS LENORA H PUSTA 855
Full Name (Last, First, Middle Initial)

Mailing Address 138 W SUNFLOWER DR

City PAYSON	State AZ	Zip Code 85541
----------------	-------------	-------------------

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
11	/	25	/	2013

Transaction ID : SA11AI.128581

Amount of Each Receipt this Period

100.00

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: PAGE 517 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR RYAN Q RAGER 438
 Full Name (Last, First, Middle Initial)
 Mailing Address 3001 MCCAMENT RD
 City State Zip Code
 WALHONDING OH 43843
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 FINISH CARPENTRY CARPENTER
 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 / 09 / 2013
Transaction ID : SA11Al.128762
 Amount of Each Receipt this Period
 75.00

B. MR THERON E RAGSDALE 378
 Full Name (Last, First, Middle Initial)
 Mailing Address 16 RIVERS CT
 City State Zip Code
 OAK RIDGE TN 37830
 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
 07 / 01 / 2013
Transaction ID : SA11Al.128763
 Amount of Each Receipt this Period
 25.00

C. MR THERON E RAGSDALE 378
 Full Name (Last, First, Middle Initial)
 Mailing Address 16 RIVERS CT
 City State Zip Code
 OAK RIDGE TN 37830
 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 / 12 / 2013
Transaction ID : SA11Al.128764
 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: PAGE 518 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR THERON E RAGSDALE 378
 Full Name (Last, First, Middle Initial)
 Mailing Address 16 RIVERS CT
 City OAK RIDGE State TN Zip Code 37830
 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
 09 / 25 / 2013
Transaction ID : SA11AI.146535
 Amount of Each Receipt this Period
 25.00

B. MR THERON E RAGSDALE 378
 Full Name (Last, First, Middle Initial)
 Mailing Address 16 RIVERS CT
 City OAK RIDGE State TN Zip Code 37830
 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
 09 / 27 / 2013
Transaction ID : SA11AI.128765
 Amount of Each Receipt this Period
 25.00

C. MR THERON E RAGSDALE 378
 Full Name (Last, First, Middle Initial)
 Mailing Address 16 RIVERS CT
 City OAK RIDGE State TN Zip Code 37830
 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 ▼ 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 13 / 2013
Transaction ID : SA11AI.128766
 Amount of Each Receipt this Period
 40.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00
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 519 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

A. MR ORLIN J RAJALA 925
 Full Name (Last, First, Middle Initial)
 Mailing Address 23905 CLINTON KEITH RD STE 114
 City WILDOMAR State CA Zip Code 92595
 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 ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2013
Transaction ID : SA11AI.128806
 Amount of Each Receipt this Period
 75.00

B. MRS MARGARET RALPH 782
 Full Name (Last, First, Middle Initial)
 Mailing Address 16514 HIDDEN VIEW ST
 City SAN ANTONIO State TX Zip Code 78232
 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 / 2013
Transaction ID : SA11AI.128820
 Amount of Each Receipt this Period
 100.00

C. MRS MARGARET RALPH 782
 Full Name (Last, First, Middle Initial)
 Mailing Address 16514 HIDDEN VIEW ST
 City SAN ANTONIO State TX Zip Code 78232
 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
 10 / 16 / 2013
Transaction ID : SA11AI.128822
 Amount of Each Receipt this Period
 100.00

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: PAGE 520 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS LAVONNE C RAMSEY 506
 Full Name (Last, First, Middle Initial)
 Mailing Address 603 WEST ST
 City REINBECK State IA Zip Code 50669
 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 / 26 / 2013
Transaction ID : SA11AI.128866
 Amount of Each Receipt this Period
 75.00

B. MS LAVONNE C RAMSEY 506
 Full Name (Last, First, Middle Initial)
 Mailing Address 603 WEST ST
 City REINBECK State IA Zip Code 50669
 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
 11 / 11 / 2013
Transaction ID : SA11AI.128867
 Amount of Each Receipt this Period
 75.00

C. MR MEL H RANDRUP 750
 Full Name (Last, First, Middle Initial)
 Mailing Address 3213 SAINT PIERRE
 City MCKINNEY State TX Zip Code 75070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LIVE THE FULL LIFE 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 / 20 / 2013
Transaction ID : SA11AI.128903
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
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 521 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. OTHEDA G RANEY 398
 Full Name (Last, First, Middle Initial)
 Mailing Address 152 KELLEY LN
 City BAINBRIDGE State GA Zip Code 39817
 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
 10 / 25 / 2013
Transaction ID : SA11AI.128911
 Amount of Each Receipt this Period
 75.00

B. OTHEDA G RANEY 398
 Full Name (Last, First, Middle Initial)
 Mailing Address 152 KELLEY LN
 City BAINBRIDGE State GA Zip Code 39817
 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
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2013
Transaction ID : SA11AI.128909
 Amount of Each Receipt this Period
 100.00

C. MS PATRICIA RANKIN 685
 Full Name (Last, First, Middle Initial)
 Mailing Address 3500 FAULKNER DR
 APT E112
 City LINCOLN State NE Zip Code 68516
 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
 10 / 07 / 2013
Transaction ID : SA11AI.128921
 Amount of Each Receipt this Period
 75.00

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 522 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS SHARON B RANKIN 800
 Full Name (Last, First, Middle Initial)
 Mailing Address 5931 TAFT ST
 City ARVADA State CO Zip Code 80004
 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
 12 / 11 / 2013
Transaction ID : SA11AI.128922
 Amount of Each Receipt this Period
 50.00

B. MS MARTHA D RAPIER 973
 Full Name (Last, First, Middle Initial)
 Mailing Address 8015 NW RIDGEWOOD DR
 City CORVALLIS State OR Zip Code 97330
 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 / 15 / 2013
Transaction ID : SA11AI.128944
 Amount of Each Receipt this Period
 75.00

C. MS MARTHA D RAPIER 973
 Full Name (Last, First, Middle Initial)
 Mailing Address 8015 NW RIDGEWOOD DR
 City CORVALLIS State OR Zip Code 97330
 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
 10 / 02 / 2013
Transaction ID : SA11AI.128945
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
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 523 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

A. MS ELLA M RAWLINGS 922
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 396

City CATHEDRAL CITY State CA Zip Code 92235

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 / 30 / 2013

Transaction ID : SA11AI.129039

Amount of Each Receipt this Period
100.00

B. MS ELLA M RAWLINGS 922
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 396

City CATHEDRAL CITY State CA Zip Code 92235

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
10 / 30 / 2013

Transaction ID : SA11AI.129040

Amount of Each Receipt this Period
100.00

C. MS LORRAINE REDA 080
Full Name (Last, First, Middle Initial)

Mailing Address 40 SHIPPS WAY

City DELANCO State NJ Zip Code 08075

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 / 11 / 2013

Transaction ID : SA11AI.129150

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 524 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS LORRAINE REDA 080
 Full Name (Last, First, Middle Initial)
 Mailing Address 40 SHIPPS WAY
 City DELANCO State NJ Zip Code 08075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2013
Transaction ID : SA11AI.129149
 Amount of Each Receipt this Period
 50.00

B. MR JACK REEVES 350
 Full Name (Last, First, Middle Initial)
 Mailing Address 617 OAK ST
 City BESSEMER State AL Zip Code 35022
 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
 12 / 02 / 2013
Transaction ID : SA11AI.129300
 Amount of Each Receipt this Period
 50.00

C. MR JAMES REISS 891
 Full Name (Last, First, Middle Initial)
 Mailing Address 6871 TAMARUS ST
 UNIT 204
 City LAS VEGAS State NV Zip Code 89119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ALBERTSONS STORE Occupation RETAIL
 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 / 20 / 2013
Transaction ID : SA11AI.129412
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 130.00
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 525 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR JAMES REISS 891		Date of Receipt
Mailing Address 6871 TAMARUS ST UNIT 204		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code
LAS VEGAS	NV	89119
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.129417
Name of Employer	Occupation	Amount of Each Receipt this Period
ALBERTSONS STORE	RETAIL	<input type="text" value=""/>
Receipt For:	Aggregate Year-to-Date ▼	<input type="text" value="15.00"/>
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value=""/>	<input type="text" value="220.00"/>
<input type="checkbox"/> Other (specify) ▼	<input type="text" value=""/>	

Full Name (Last, First, Middle Initial) B. MR JAMES REISS 891		Date of Receipt
Mailing Address 6871 TAMARUS ST UNIT 204		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code
LAS VEGAS	NV	89119
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.129413
Name of Employer	Occupation	Amount of Each Receipt this Period
ALBERTSONS STORE	RETAIL	<input type="text" value=""/>
Receipt For:	Aggregate Year-to-Date ▼	<input type="text" value="15.00"/>
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value=""/>	<input type="text" value="235.00"/>
<input type="checkbox"/> Other (specify) ▼	<input type="text" value=""/>	

Full Name (Last, First, Middle Initial) C. MS PATRICIA A REITZ 434		Date of Receipt
Mailing Address 5152 STATE ROUTE 101 E		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code
CLYDE	OH	43410
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.129424
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value=""/>
Receipt For:	Aggregate Year-to-Date ▼	<input type="text" value="40.00"/>
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value=""/>	<input type="text" value="215.00"/>
<input type="checkbox"/> Other (specify) ▼	<input type="text" value=""/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="70.00"/>
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 526 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS PATRICIA A REITZ 434
Full Name (Last, First, Middle Initial)
Mailing Address 5152 STATE ROUTE 101 E

City CLYDE	State OH	Zip Code 43410
---------------	-------------	-------------------

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
10	/	07	/	2013

Transaction ID : SA11AI.129425

Amount of Each Receipt this Period
50.00

B. MS PATRICIA A REITZ 434
Full Name (Last, First, Middle Initial)
Mailing Address 5152 STATE ROUTE 101 E

City CLYDE	State OH	Zip Code 43410
---------------	-------------	-------------------

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
12	/	06	/	2013

Transaction ID : SA11AI.129423

Amount of Each Receipt this Period
50.00

C. MS PATRICIA A REITZ 434
Full Name (Last, First, Middle Initial)
Mailing Address 5152 STATE ROUTE 101 E

City CLYDE	State OH	Zip Code 43410
---------------	-------------	-------------------

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 ▼
355.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	27	/	2013

Transaction ID : SA11AI.129422

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional).....▶	140.00
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 527 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR ERIK G RENKEN 774
 Full Name (Last, First, Middle Initial)
 Mailing Address 401 OSCAR ST
 City EL CAMPO State TX Zip Code 77437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF 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
 12 / 13 / 2013
Transaction ID : SA11AI.129463
 Amount of Each Receipt this Period
 80.00

B. MS ELIZABETH T RENN 498
 Full Name (Last, First, Middle Initial)
 Mailing Address 1224 FAIRBANKS ST
 City IRON MOUNTAIN State MI Zip Code 49801
 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 ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2013
Transaction ID : SA11AI.129471
 Amount of Each Receipt this Period
 200.00

C. MS ELIZABETH T RENN 498
 Full Name (Last, First, Middle Initial)
 Mailing Address 1224 FAIRBANKS ST
 City IRON MOUNTAIN State MI Zip Code 49801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 18 / 2013
Transaction ID : SA11AI.129470
 Amount of Each Receipt this Period
 250.00

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 528 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR ART REYNOLDS 068
 Full Name (Last, First, Middle Initial)
 Mailing Address 73 NOYES RD
 City State Zip Code
 FAIRFIELD CT 06824
 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 ▼
 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2013
Transaction ID : SA11AI.129543
 Amount of Each Receipt this Period
 100.00

B. MR ART REYNOLDS 068
 Full Name (Last, First, Middle Initial)
 Mailing Address 73 NOYES RD
 City State Zip Code
 FAIRFIELD CT 06824
 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 ▼
 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2013
Transaction ID : SA11AI.129542
 Amount of Each Receipt this Period
 50.00

C. MS KATHLEEN O REYNOLDS 087
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 1131
 City State Zip Code
 ISLAND HEIGHTS NJ 08732
 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 M / D D D / Y Y Y Y Y Y
 08 / 12 / 2013
Transaction ID : SA11AI.129545
 Amount of Each Receipt this Period
 75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
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 529 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR WILLIAM T REYNOLDS 276		Date of Receipt
Mailing Address 2905 MARS ST		<input type="text" value="10"/> / <input type="text" value="07"/> / <input type="text" value="2013"/>
City	State	Zip Code
RALEIGH	NC	27604
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.129556
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="150.00"/>
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 WILLIAM T REYNOLDS 276		Date of Receipt
Mailing Address 2905 MARS ST		<input type="text" value="11"/> / <input type="text" value="12"/> / <input type="text" value="2013"/>
City	State	Zip Code
RALEIGH	NC	27604
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.129557
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<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="450.00"/>	

Full Name (Last, First, Middle Initial) C. MS SHARON K REZAC 685		Date of Receipt
Mailing Address 2211 W PLUM ST		<input type="text" value="11"/> / <input type="text" value="21"/> / <input type="text" value="2013"/>
City	State	Zip Code
LINCOLN	NE	68522
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.129583
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="225.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="375.00"/>
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 530 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR DON RHODES 465
Full Name (Last, First, Middle Initial)

Mailing Address 5073 W LAKEVIEW PARK DR

City WARSAW State IN Zip Code 46580

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 / 26 / 2013
Transaction ID : SA11AI.129634

Amount of Each Receipt this Period
 75.00

B. MRS GREYNELL RICHARD 920
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 2195

City RANCHO SANTA FE State CA Zip Code 92067

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
 12 / 26 / 2013
Transaction ID : SA11AI.129697

Amount of Each Receipt this Period
 300.00

C. MR LUNSFORD RICHARDSON 274 JR
Full Name (Last, First, Middle Initial)

Mailing Address 4100 WELL SPRING DR
UNIT 1120

City GREENSBORO State NC Zip Code 27410

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

Name of Employer RICHARDSON PROPERTIES INC Occupation CHAIRMAN

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 / 01 / 2013
Transaction ID : SA11AI.129720

Amount of Each Receipt this Period
 450.00

SUBTOTAL of Receipts This Page (optional).....▶	825.00
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 531 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR LUNSFORD RICHARDSON 274 JR		Date of Receipt
Mailing Address 4100 WELL SPRING DR UNIT 1120		<input type="text" value="07"/> / <input type="text" value="18"/> / <input type="text" value="2013"/>
City	State	Zip Code
GREENSBORO	NC	27410
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.129721
Name of Employer	Occupation	Amount of Each Receipt this Period
RICHARDSON PROPERTIES INC	CHAIRMAN	<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="750.00"/>	

Full Name (Last, First, Middle Initial) B. MS MELISSA M RICHARDSON 852		Date of Receipt
Mailing Address 2440 S MILL AVE APT 137		<input type="text" value="08"/> / <input type="text" value="23"/> / <input type="text" value="2013"/>
City	State	Zip Code
TEMPE	AZ	85282
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.129745
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="175.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="275.00"/>	

Full Name (Last, First, Middle Initial) C. DR GLENN U RICHEY 835 DDS		Date of Receipt
Mailing Address PO BOX 1009		<input type="text" value="11"/> / <input type="text" value="20"/> / <input type="text" value="2013"/>
City	State	Zip Code
OROFINO	ID	83544
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.129761
Name of Employer	Occupation	Amount of Each Receipt this Period
CHASE FLAT PROFESSIONAL CENTER	DENTIST	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="225.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="525.00"/>
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 532 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS MARY RICHTER 956		Date of Receipt
Mailing Address 22488 KARNAK RD		<input type="text" value="12"/> / <input type="text" value="13"/> / <input type="text" value="2013"/>
City	State	Zip Code
KNIGHTS LANDING	CA	95645
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
SELF EMPLOYED	FARMER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="275.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="75.00"/>

Full Name (Last, First, Middle Initial) B. MR JAMES M RICKELS 764		Date of Receipt
Mailing Address PO BOX 536		<input type="text" value="07"/> / <input type="text" value="03"/> / <input type="text" value="2013"/>
City	State	Zip Code
COMANCHE	TX	76442
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
GENOMIC RESOURCES INC	VICE PRESIDENT	
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="75.00"/>

Full Name (Last, First, Middle Initial) C. MR JAMES M RICKELS 764		Date of Receipt
Mailing Address PO BOX 536		<input type="text" value="10"/> / <input type="text" value="03"/> / <input type="text" value="2013"/>
City	State	Zip Code
COMANCHE	TX	76442
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
GENOMIC RESOURCES INC	VICE PRESIDENT	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="375.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="75.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="225.00"/>
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 533 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS JAYNE L RICKERT 530
 Full Name (Last, First, Middle Initial)
 Mailing Address 838 KIRKLAND CT
 City PEWAUKEE State WI Zip Code 53072
 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 / 03 / 2013
Transaction ID : SA11Al.129811
 Amount of Each Receipt this Period
 100.00

B. MS JAYNE L RICKERT 530
 Full Name (Last, First, Middle Initial)
 Mailing Address 838 KIRKLAND CT
 City PEWAUKEE State WI Zip Code 53072
 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 / 2013
Transaction ID : SA11Al.129815
 Amount of Each Receipt this Period
 50.00

C. MS JAYNE L RICKERT 530
 Full Name (Last, First, Middle Initial)
 Mailing Address 838 KIRKLAND CT
 City PEWAUKEE State WI Zip Code 53072
 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
 11 / 12 / 2013
Transaction ID : SA11Al.129816
 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 534 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR KEVIN B RIDDLE 790
 Full Name (Last, First, Middle Initial)
 Mailing Address 1102 SW 9TH AVE
 City PERRYTON State TX Zip Code 79070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BANK OF AMERICA Occupation SR TECH MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 27 / 2013
Transaction ID : SA11AI.129839
 Amount of Each Receipt this Period
 100.00

B. MR KEVIN B RIDDLE 790
 Full Name (Last, First, Middle Initial)
 Mailing Address 1102 SW 9TH AVE
 City PERRYTON State TX Zip Code 79070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BANK OF AMERICA Occupation SR TECH MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 27 / 2013
Transaction ID : SA11AI.129838
 Amount of Each Receipt this Period
 100.00

C. MS MARGOT A RIEGER 184
 Full Name (Last, First, Middle Initial)
 Mailing Address 880 LONG RIDGE RD
 City HAWLEY State PA Zip Code 18428
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 18 / 2013
Transaction ID : SA11AI.129885
 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 535 OF 724
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS SUZANNE M RILEY 254
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 92
 City SLANESVILLE State WV Zip Code 25444
 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 ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2013
Transaction ID : SA11AI.129953
 Amount of Each Receipt this Period
 200.00

B. MS MARILYN A RILEY 768
 Full Name (Last, First, Middle Initial)
 Mailing Address 2410 SONG BIRD CIR APT 38
 City BROWNWOOD State TX Zip Code 76801
 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 / 26 / 2013
Transaction ID : SA11AI.129958
 Amount of Each Receipt this Period
 75.00

C. MS MARILYN A RILEY 768
 Full Name (Last, First, Middle Initial)
 Mailing Address 2410 SONG BIRD CIR APT 38
 City BROWNWOOD State TX Zip Code 76801
 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
 10 / 28 / 2013
Transaction ID : SA11AI.129956
 Amount of Each Receipt this Period
 75.00

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 536 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS MARILYN A RILEY 768
 Full Name (Last, First, Middle Initial)
 Mailing Address 2410 SONG BIRD CIR APT 38
 City BROWNWOOD State TX Zip Code 76801
 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 / D D / Y Y Y Y Y
 11 / 04 / 2013
Transaction ID : SA11AI.129957
 Amount of Each Receipt this Period
 50.00

B. MR VAN RIPLEY 458
 Full Name (Last, First, Middle Initial)
 Mailing Address 8847 GERMANN RD
 City CONVOY State OH Zip Code 45832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 08 / 2013
Transaction ID : SA11AI.129998
 Amount of Each Receipt this Period
 150.00

C. MR VAN RIPLEY 458
 Full Name (Last, First, Middle Initial)
 Mailing Address 8847 GERMANN RD
 City CONVOY State OH Zip Code 45832
 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
 11 / 18 / 2013
Transaction ID : SA11AI.129999
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	225.00
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 537 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR KENNETH L ROBERSON 338
 Full Name (Last, First, Middle Initial)
 Mailing Address 4514 WINDEE AVE
 City LAKELAND State FL Zip Code 33811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer THE VOTERS Occupation ELECTED REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 08 / 2013
Transaction ID : SA11Al.130102
 Amount of Each Receipt this Period 75.00

B. MS RITA E ROBBINS 467
 Full Name (Last, First, Middle Initial)
 Mailing Address 1615 S CLARK RD
 City MARKLE State IN Zip Code 46770
 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 11 / 15 / 2013
Transaction ID : SA11Al.130106
 Amount of Each Receipt this Period 200.00

C. MS SANDRA S ROBERSON 624
 Full Name (Last, First, Middle Initial)
 Mailing Address 702 W LOCUST LN
 City ROBINSON State IL Zip Code 62454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 02 / 2013
Transaction ID : SA11Al.130123
 Amount of Each Receipt this Period 25.00

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 538 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS SANDRA S ROBERSON 624
Full Name (Last, First, Middle Initial)

Mailing Address 702 W LOCUST LN

City ROBINSON State IL Zip Code 62454

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 ▼ **310.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 30 / 2013

Transaction ID : SA11AI.130125

Amount of Each Receipt this Period
100.00

B. MS SANDRA S ROBERSON 624
Full Name (Last, First, Middle Initial)

Mailing Address 702 W LOCUST LN

City ROBINSON State IL Zip Code 62454

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 ▼ **335.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 27 / 2013

Transaction ID : SA11AI.130124

Amount of Each Receipt this Period
25.00

C. MR NORMAN ROBERT 708
Full Name (Last, First, Middle Initial)

Mailing Address 1908 HERMADEL DR

City BATON ROUGE State LA Zip Code 70816

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary 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 / 06 / 2013

Transaction ID : SA11AI.130136

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: (check only one)	PAGE 539 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR NORMAN ROBERT 708
 Full Name (Last, First, Middle Initial)
 Mailing Address 1908 HERMADEL DR
 City BATON ROUGE State LA Zip Code 70816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2013
Transaction ID : SA11Al.130139
 Amount of Each Receipt this Period
 100.00

B. MS RUTH K ROBERTS 231
 Full Name (Last, First, Middle Initial)
 Mailing Address 9025 CRANEY ISLAND RD
 City MECHANICSVILLE State VA Zip Code 23116
 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
 12 / 27 / 2013
Transaction ID : SA11Al.130158
 Amount of Each Receipt this Period
 50.00

C. MR JOHN ROBERTSON 342
 Full Name (Last, First, Middle Initial)
 Mailing Address 1309 PINE NEEDLE RD
 City VENICE State FL Zip Code 34285
 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 ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 18 / 2013
Transaction ID : SA11Al.130232
 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: (check only one)	PAGE 540 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS GRACE V ROBINSON 377
 Full Name (Last, First, Middle Initial)
 Mailing Address 301 PIGEON CREEK RD
 City GREENEVILLE State TN Zip Code 37743
 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
 11 / 21 / 2013
Transaction ID : SA11AI.130266
 Amount of Each Receipt this Period
 50.00

B. MR DONALD E ROCKEY 168
 Full Name (Last, First, Middle Initial)
 Mailing Address 505 FETZERTOWN RD
 City BELLEFONTE State PA Zip Code 16823
 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 / 18 / 2013
Transaction ID : SA11AI.130365
 Amount of Each Receipt this Period
 75.00

C. MR DONALD E ROCKEY 168
 Full Name (Last, First, Middle Initial)
 Mailing Address 505 FETZERTOWN RD
 City BELLEFONTE State PA Zip Code 16823
 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
 12 / 18 / 2013
Transaction ID : SA11AI.130366
 Amount of Each Receipt this Period
 75.00

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 541 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR JAMES RODEBAUGH 490
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 238
 City VERMONTVILLE State MI Zip Code 49096
 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 / 03 / 2013
Transaction ID : SA11AI.130383
 Amount of Each Receipt this Period
 100.00

B. MR JAMES RODEBAUGH 490
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 238
 City VERMONTVILLE State MI Zip Code 49096
 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 / 19 / 2013
Transaction ID : SA11AI.130384
 Amount of Each Receipt this Period
 150.00

C. MR JAMES RODEBAUGH 490
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 238
 City VERMONTVILLE State MI Zip Code 49096
 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
 10 / 03 / 2013
Transaction ID : SA11AI.130385
 Amount of Each Receipt this Period
 100.00

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 542 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS ANNABEL A RODGERS 450		Date of Receipt
Mailing Address 113 ANNE RD		<input type="text" value="07"/> / <input type="text" value="19"/> / <input type="text" value="2013"/>
City	State	Zip Code
MIDDLETOWN	OH	45044
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.130395
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="220.00"/>	

Full Name (Last, First, Middle Initial) B. MS ANNABEL A RODGERS 450		Date of Receipt
Mailing Address 113 ANNE RD		<input type="text" value="07"/> / <input type="text" value="26"/> / <input type="text" value="2013"/>
City	State	Zip Code
MIDDLETOWN	OH	45044
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.130393
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="320.00"/>	

Full Name (Last, First, Middle Initial) C. MS ANNABEL A RODGERS 450		Date of Receipt
Mailing Address 113 ANNE RD		<input type="text" value="09"/> / <input type="text" value="12"/> / <input type="text" value="2013"/>
City	State	Zip Code
MIDDLETOWN	OH	45044
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.130394
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="220.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="20.00"/>
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 543 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

A. LAWRENCE H ROGERS 452
 Full Name (Last, First, Middle Initial)
 Mailing Address 4600 DRAKE RD
 City CINCINNATI State OH Zip Code 45243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 18 / 2013
Transaction ID : SA11AI.130502
 Amount of Each Receipt this Period
 150.00

B. MR LAWRENCE H ROGERS 452
 Full Name (Last, First, Middle Initial)
 Mailing Address 4600 DRAKE RD
 City CINCINNATI State OH Zip Code 45243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2013
Transaction ID : SA11AI.130505
 Amount of Each Receipt this Period
 100.00

C. MR JOHN W ROGERS 641
 Full Name (Last, First, Middle Initial)
 Mailing Address 121 W 48TH ST
 APT 308
 City KANSAS CITY State MO Zip Code 64112
 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 / 01 / 2013
Transaction ID : SA11AI.130515
 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: (check only one)	PAGE 544 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR JOHN W ROGERS 641		Date of Receipt
Mailing Address 121 W 48TH ST APT 308		<input type="text" value="09"/> / <input type="text" value="03"/> / <input type="text" value="2013"/>
City KANSAS CITY	State MO	Zip Code 64112
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.130518
Name of Employer NONE	Occupation RETIRED	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="100.00"/>
	<input type="text" value="500.00"/>	

Full Name (Last, First, Middle Initial) B. MR JOHN W ROGERS 641		Date of Receipt
Mailing Address 121 W 48TH ST APT 308		<input type="text" value="10"/> / <input type="text" value="01"/> / <input type="text" value="2013"/>
City KANSAS CITY	State MO	Zip Code 64112
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.130516
Name of Employer NONE	Occupation RETIRED	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="150.00"/>
	<input type="text" value="650.00"/>	

Full Name (Last, First, Middle Initial) C. MR JOHN W ROGERS 641		Date of Receipt
Mailing Address 121 W 48TH ST APT 308		<input type="text" value="11"/> / <input type="text" value="22"/> / <input type="text" value="2013"/>
City KANSAS CITY	State MO	Zip Code 64112
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.130517
Name of Employer NONE	Occupation RETIRED	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="75.00"/>
	<input type="text" value="725.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="325.00"/>
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 545 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS TERESA ROGERS 752
 Full Name (Last, First, Middle Initial)
 Mailing Address 4746 TWIN POST RD
 City DALLAS State TX Zip Code 75244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DUN & BRADSTREET CORP Occupation NATIONAL ACCOUNT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 03 / 2013
Transaction ID : SA11AI.130528
 Amount of Each Receipt this Period
 50.00

B. MS TERESA ROGERS 752
 Full Name (Last, First, Middle Initial)
 Mailing Address 4746 TWIN POST RD
 City DALLAS State TX Zip Code 75244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DUN & BRADSTREET CORP Occupation NATIONAL ACCOUNT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 20 / 2013
Transaction ID : SA11AI.130529
 Amount of Each Receipt this Period
 35.00

C. MS NORMA RONSTROM 329
 Full Name (Last, First, Middle Initial)
 Mailing Address 3395 GRAPE ST
 City COCOA State FL Zip Code 32926
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MUSIC TEACHER Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 13 / 2013
Transaction ID : SA11AI.130650
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 105.00
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 546 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS NORMA RONSTROM 329
Full Name (Last, First, Middle Initial)
Mailing Address 3395 GRAPE ST

City COCOA	State FL	Zip Code 32926
---------------	-------------	-------------------

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

Name of Employer MUSIC TEACHER	Occupation RETIRED
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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
12	/	12	/	2013

Transaction ID : SA11AI.130649

Amount of Each Receipt this Period
200.00

B. MR LLESTER RORIK 245
Full Name (Last, First, Middle Initial)
Mailing Address 3001 SANDY RIDGE RD

City NATHALIE	State VA	Zip Code 24577
------------------	-------------	-------------------

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	/	12	/	2013

Transaction ID : SA11AI.130691

Amount of Each Receipt this Period
100.00

C. R EDWARD ROSE 020
Full Name (Last, First, Middle Initial)
Mailing Address 13 CLARK RD

City HINGHAM	State MA	Zip Code 02043
-----------------	-------------	-------------------

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

Name of Employer UNITRAC,LLC	Occupation EXECUTIVE
---------------------------------	-------------------------

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	/	19	/	2013

Transaction ID : SA11AI.130706

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	170.00
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 547 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. R EDWARD ROSE 020
Full Name (Last, First, Middle Initial)
Mailing Address 13 CLARK RD

City HINGHAM	State MA	Zip Code 02043
-----------------	-------------	-------------------

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

Name of Employer UNITRAC,LLC	Occupation EXECUTIVE
---------------------------------	-------------------------

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	/	23	/	2013

Transaction ID : SA11Al.130705

Amount of Each Receipt this Period
125.00

B. R EDWARD ROSE 020
Full Name (Last, First, Middle Initial)
Mailing Address 13 CLARK RD

City HINGHAM	State MA	Zip Code 02043
-----------------	-------------	-------------------

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

Name of Employer UNITRAC,LLC	Occupation EXECUTIVE
---------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
575.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	19	/	2013

Transaction ID : SA11Al.130707

Amount of Each Receipt this Period
50.00

C. MR RAY ROSS 168
Full Name (Last, First, Middle Initial)
Mailing Address 1219 RIVERVIEW RD

City CLEARFIELD	State PA	Zip Code 16830
--------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	19	/	2013

Transaction ID : SA11Al.130770

Amount of Each Receipt this Period
175.00

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: PAGE 548 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS ANN R ROSS 370
 Full Name (Last, First, Middle Initial)
 Mailing Address 358 PEARTREE DR
 City CLARKSVILLE State TN Zip Code 37043
 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
 M M / D D / Y Y Y Y Y Y
 07 / 08 / 2013
Transaction ID : SA11Al.130782
 Amount of Each Receipt this Period
 100.00

B. MS ANN R ROSS 370
 Full Name (Last, First, Middle Initial)
 Mailing Address 358 PEARTREE DR
 City CLARKSVILLE State TN Zip Code 37043
 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 ▼ 295.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 04 / 2013
Transaction ID : SA11Al.130783
 Amount of Each Receipt this Period
 50.00

C. MR CLARENCE A ROSS 440
 Full Name (Last, First, Middle Initial)
 Mailing Address 286 BAYSHORE DR
 City EASTLAKE State OH Zip Code 44095
 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
 08 / 13 / 2013
Transaction ID : SA11Al.130795
 Amount of Each Receipt this Period
 100.00

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 549 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR CLARENCE A ROSS 440
 Full Name (Last, First, Middle Initial)
 Mailing Address 286 BAYSHORE DR
 City EASTLAKE State OH Zip Code 44095
 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 / 2013
Transaction ID : SA11AI.130796
 Amount of Each Receipt this Period
 50.00

B. MS DEIDRE ROTH 630
 Full Name (Last, First, Middle Initial)
 Mailing Address 1934 CHESTERFIELD RIDGE CIR
 City CHESTERFIELD State MO Zip Code 63017
 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 / 06 / 2013
Transaction ID : SA11AI.130872
 Amount of Each Receipt this Period
 75.00

C. MS DEIDRE ROTH 630
 Full Name (Last, First, Middle Initial)
 Mailing Address 1934 CHESTERFIELD RIDGE CIR
 City CHESTERFIELD State MO Zip Code 63017
 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
 11 / 06 / 2013
Transaction ID : SA11AI.130873
 Amount of Each Receipt this Period
 75.00

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 550 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR JOSEPH C ROTH 662
 Full Name (Last, First, Middle Initial)
 Mailing Address 8995 CEDAR NILES RD
 City LENEKA State KS Zip Code 66227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ALFRED BENESCH Occupation ASSISTANT
 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
 11 / 04 / 2013
Transaction ID : SA11AI.130876
 Amount of Each Receipt this Period
 75.00

B. MR JOSEPH C ROTH 662
 Full Name (Last, First, Middle Initial)
 Mailing Address 8995 CEDAR NILES RD
 City LENEKA State KS Zip Code 66227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ALFRED BENESCH Occupation ASSISTANT
 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
 12 / 11 / 2013
Transaction ID : SA11AI.130875
 Amount of Each Receipt this Period
 100.00

C. MR KENNETH ROWE 960
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 1523
 City COTTONWOOD State CA Zip Code 96022
 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 / 15 / 2013
Transaction ID : SA11AI.130960
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
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 551 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR KENNETH ROWE 960
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 1523
 City COTTONWOOD State CA Zip Code 96022
 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 / D D / Y Y Y Y Y
 07 / 24 / 2013
Transaction ID : SA11AI.130961
 Amount of Each Receipt this Period
 100.00

B. MR MELVIN H RUFF 431
 Full Name (Last, First, Middle Initial)
 Mailing Address 3870 RUFF RD SW
 City AMANDA State OH Zip Code 43102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RUFF FEED FARMS FARMER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 17 / 2013
Transaction ID : SA11AI.131077
 Amount of Each Receipt this Period
 100.00

C. MR LARRY L RULE 805
 Full Name (Last, First, Middle Initial)
 Mailing Address 1199 LINKS CT
 City ERIE State CO Zip Code 80516
 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
 11 / 28 / 2013
Transaction ID : SA11AI.131114
 Amount of Each Receipt this Period
 125.00

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 552 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS SHIRLEY RUMPLE 474
 Full Name (Last, First, Middle Initial)
 Mailing Address 60 CONCORD RD
 City State Zip Code
 SPENCER IN 47460
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE NOT EMPLOYED
 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 / 2013
Transaction ID : SA11AI.131124
 Amount of Each Receipt this Period
 150.00

B. MS SHIRLEY RUMPLE 474
 Full Name (Last, First, Middle Initial)
 Mailing Address 60 CONCORD RD
 City State Zip Code
 SPENCER IN 47460
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE NOT EMPLOYED
 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
 10 / 14 / 2013
Transaction ID : SA11AI.131123
 Amount of Each Receipt this Period
 100.00

C. MS MURIEL RUSSELL 064
 Full Name (Last, First, Middle Initial)
 Mailing Address 183 SHORT BEACH RD
 City State Zip Code
 BRANFORD CT 06405
 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
 07 / 22 / 2013
Transaction ID : SA11AI.131213
 Amount of Each Receipt this Period
 100.00

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 553 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS MURIEL RUSSELL 064		Date of Receipt
Mailing Address 183 SHORT BEACH RD		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City State Zip Code BRANFORD CT 06405		<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2013"/>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.131214
Name of Employer Occupation NONE RETIRED		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="100.00"/>
Aggregate Year-to-Date ▼		<input type="text" value="400.00"/>

Full Name (Last, First, Middle Initial) B. EDITH H RUSSELL 373		Date of Receipt
Mailing Address 1801 WILLIAMS COVE RD		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City State Zip Code WINCHESTER TN 37398		<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2013"/>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.131233
Name of Employer Occupation NONE RETIRED		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="25.00"/>
Aggregate Year-to-Date ▼		<input type="text" value="205.00"/>

Full Name (Last, First, Middle Initial) C. EDITH H RUSSELL 373		Date of Receipt
Mailing Address 1801 WILLIAMS COVE RD		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City State Zip Code WINCHESTER TN 37398		<input type="text" value="09"/> / <input type="text" value="23"/> / <input type="text" value="2013"/>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.131234
Name of Employer Occupation NONE RETIRED		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="50.00"/>
Aggregate Year-to-Date ▼		<input type="text" value="255.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="175.00"/>
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 554 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. EDITH H RUSSELL 373
 Full Name (Last, First, Middle Initial)
 Mailing Address 1801 WILLIAMS COVE RD
 City WINCHESTER State TN Zip Code 37398
 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
 11 / 13 / 2013
Transaction ID : SA11AI.131232
 Amount of Each Receipt this Period
 25.00

B. EDITH H RUSSELL 373
 Full Name (Last, First, Middle Initial)
 Mailing Address 1801 WILLIAMS COVE RD
 City WINCHESTER State TN Zip Code 37398
 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
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2013
Transaction ID : SA11AI.131231
 Amount of Each Receipt this Period
 50.00

C. MR JAMES S RUSSELL 458
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 323
 City ALGER State OH Zip Code 45812
 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
 07 / 29 / 2013
Transaction ID : SA11AI.131244
 Amount of Each Receipt this Period
 75.00

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:	PAGE 555 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

A. MRS ANTOYE M RYAN 535
 Full Name (Last, First, Middle Initial)
 Mailing Address 7348 S PINNOW GROVE RD
 City BELOIT State WI Zip Code 53511
 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 ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2013
Transaction ID : SA11Al.131346
 Amount of Each Receipt this Period
 250.00

B. MRS ANTOYE M RYAN 535
 Full Name (Last, First, Middle Initial)
 Mailing Address 7348 S PINNOW GROVE RD
 City BELOIT State WI Zip Code 53511
 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 ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 18 / 2013
Transaction ID : SA11Al.131344
 Amount of Each Receipt this Period
 50.00

C. MS SANDRA J RYAN 928
 Full Name (Last, First, Middle Initial)
 Mailing Address 5005 E CRESCENT DR
 City ANAHEIM State CA Zip Code 92807
 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
 12 / 19 / 2013
Transaction ID : SA11Al.131365
 Amount of Each Receipt this Period
 250.00

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 556 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MRS MARY B RYSER 234
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 476

City MELFA	State VA	Zip Code 23410
---------------	-------------	-------------------

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
 09 / 12 / 2013
Transaction ID : SA11Al.131388

Amount of Each Receipt this Period
 100.00

B. MRS MARY B RYSER 234
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 476

City MELFA	State VA	Zip Code 23410
---------------	-------------	-------------------

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 ▼
 380.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 18 / 2013
Transaction ID : SA11Al.131387

Amount of Each Receipt this Period
 175.00

C. MS JANE L SABO 346
 Full Name (Last, First, Middle Initial)
 Mailing Address 3301 ALT 19
 LOT 116

City DUNEDIN	State FL	Zip Code 34698
-----------------	-------------	-------------------

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 / 10 / 2013
Transaction ID : SA11Al.131410

Amount of Each Receipt this Period
 75.00

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:		PAGE 557 OF 724						
	(check only one)	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS JANE L SABO 346		Date of Receipt MM / DD / YYYY 11 / 06 / 2013 Transaction ID : SA11Al.131409
Mailing Address 3301 ALT 19 LOT 116		Amount of Each Receipt this Period 35.00
City DUNEDIN	State FL	Zip Code 34698
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 265.00
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MR DARRELL L SAGE 784		Date of Receipt MM / DD / YYYY 12 / 13 / 2013 Transaction ID : SA11Al.131451
Mailing Address 3301 MAHAN DR		Amount of Each Receipt this Period 35.00
City CORPUS CHRISTI	State TX	Zip Code 78415
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 214.00
Name of Employer HG GROCERIES	Occupation GROCER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MR RAYMOND SALZMAN 206		Date of Receipt MM / DD / YYYY 09 / 26 / 2013 Transaction ID : SA11Al.131523
Mailing Address 11151 RAWHIDE RD		Amount of Each Receipt this Period 50.00
City LUSBY	State MD	Zip Code 20657
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 240.00
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	120.00
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 558 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR RAYMOND SALZMAN 206		Date of Receipt
Mailing Address 11151 RAWHIDE RD		<input type="text" value="11"/> / <input type="text" value="14"/> / <input type="text" value="2013"/>
City	State	Transaction ID : SA11Al.131524
LUSBY	MD	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="290.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MR JACQUES L SAMMONS 339		Date of Receipt
Mailing Address 15195 CRICKET LN		<input type="text" value="08"/> / <input type="text" value="26"/> / <input type="text" value="2013"/>
City	State	Transaction ID : SA11Al.131531
FORT MYERS	FL	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="125.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="225.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MS STEPHANIE J SAMUELS 125		Date of Receipt
Mailing Address 25 GILBERT DR		<input type="text" value="09"/> / <input type="text" value="16"/> / <input type="text" value="2013"/>
City	State	Transaction ID : SA11Al.131556
HYDE PARK	NY	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="150.00"/>
Name of Employer	Occupation	
SELF EMPLOYED	DOCTOR	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="450.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="325.00"/>
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 559 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR JAMES R SANDBERG 693
 Full Name (Last, First, Middle Initial)
 Mailing Address 210198 FLORAL ST
 City GERING State NE Zip Code 69341
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SANDBERG FARMS Occupation FARMER
 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
 11 / 21 / 2013
Transaction ID : SA11Al.131577
 Amount of Each Receipt this Period
 100.00

B. MS 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 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 / 01 / 2013
Transaction ID : SA11Al.131598
 Amount of Each Receipt this Period
 90.00

C. MS 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 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 / 2013
Transaction ID : SA11Al.131599
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	240.00
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 560 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS 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 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
 09 / 24 / 2013
Transaction ID : SA11AI.131600
 Amount of Each Receipt this Period
 300.00

B. MS JANET B SANDERS 631
 Full Name (Last, First, Middle Initial)
 Mailing Address 40 CONWAY CLOSE RD
 City SAINT LOUIS State MO Zip Code 63124
 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
 07 / 30 / 2013
Transaction ID : SA11AI.131610
 Amount of Each Receipt this Period
 300.00

C. MS HARRIETT J SARGENT 201
 Full Name (Last, First, Middle Initial)
 Mailing Address 289 FORBES CT
 City WARRENTON State VA Zip Code 20186
 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 ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 18 / 2013
Transaction ID : SA11AI.131700
 Amount of Each Receipt this Period
 50.00

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 561 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS HARRIETT J SARGENT 201
 Full Name (Last, First, Middle Initial)
 Mailing Address 289 FORBES CT
 City WARRENTON State VA Zip Code 20186
 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 ▼ 285.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 06 / 2013
Transaction ID : SA11AI.131703
 Amount of Each Receipt this Period
 50.00

B. MS HARRIETT J SARGENT 201
 Full Name (Last, First, Middle Initial)
 Mailing Address 289 FORBES CT
 City WARRENTON State VA Zip Code 20186
 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 ▼ 335.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 17 / 2013
Transaction ID : SA11AI.131701
 Amount of Each Receipt this Period
 50.00

C. MS HARRIETT J SARGENT 201
 Full Name (Last, First, Middle Initial)
 Mailing Address 289 FORBES CT
 City WARRENTON State VA Zip Code 20186
 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 ▼ 385.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : SA11AI.131702
 Amount of Each Receipt this Period
 50.00

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 562 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR ROBERT G SCHAD 299
 Full Name (Last, First, Middle Initial)
 Mailing Address 1412 GLEASONS LANDING DR
 City SAINT HELENA ISLAN State SC Zip Code 29920
 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
 10 / 15 / 2013
Transaction ID : SA11AI.131885
 Amount of Each Receipt this Period
 200.00

B. MS MARILEE SCHANUEL 658
 Full Name (Last, First, Middle Initial)
 Mailing Address 1707 W ELFINDALE ST APT 21
 City SPRINGFIELD State MO Zip Code 65807
 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 ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 03 / 2013
Transaction ID : SA11AI.131973
 Amount of Each Receipt this Period
 50.00

C. MS MARILEE SCHANUEL 658
 Full Name (Last, First, Middle Initial)
 Mailing Address 1707 W ELFINDALE ST APT 21
 City SPRINGFIELD State MO Zip Code 65807
 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 ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 12 / 2013
Transaction ID : SA11AI.131974
 Amount of Each Receipt this Period
 20.00

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: (check only one)	PAGE 563 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS MARILEE SCHANUEL 658
 Full Name (Last, First, Middle Initial)
 Mailing Address 1707 W ELFINDALE ST APT 21
 City SPRINGFIELD State MO Zip Code 65807
 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 / 12 / 2013
Transaction ID : SA11AI.131975
 Amount of Each Receipt this Period
 15.00

B. MS BETTY SCHERER 333
 Full Name (Last, First, Middle Initial)
 Mailing Address 4640 N FEDERAL HWY STE G
 City FORT LAUDERDALE State FL Zip Code 33308
 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 ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 04 / 2013
Transaction ID : SA11AI.132033
 Amount of Each Receipt this Period
 30.00

C. MR FRANKIE SCHIERMAN 988
 Full Name (Last, First, Middle Initial)
 Mailing Address 5303 PAINTED HILLS RD
 City EPHRATA State WA Zip Code 98823
 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
 07 / 09 / 2013
Transaction ID : SA11AI.132069
 Amount of Each Receipt this Period
 125.00

SUBTOTAL of Receipts This Page (optional).....▶	170.00
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 564 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR FRANKIE SCHIERMAN 988
 Full Name (Last, First, Middle Initial)
 Mailing Address 5303 PAINTED HILLS RD
 City EPHRATA State WA Zip Code 98823
 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
 10 / 10 / 2013
Transaction ID : SA11AI.132070
 Amount of Each Receipt this Period
 125.00

B. MS KATHLEEN A SCHILL 448
 Full Name (Last, First, Middle Initial)
 Mailing Address 3413 W STONEWAY DR
 City SANDUSKY State OH Zip Code 44870
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PUBLIC SCHOOL Occupation 1ST GRADE TEACHER
 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 / 2013
Transaction ID : SA11AI.132080
 Amount of Each Receipt this Period
 150.00

C. MR LEE E SCHISLER 446
 Full Name (Last, First, Middle Initial)
 Mailing Address 1036 MILL CIR APT 62
 City ALLIANCE State OH Zip Code 44601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MHF CO INC Occupation EXECUTIVE
 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
 10 / 03 / 2013
Transaction ID : SA11AI.132104
 Amount of Each Receipt this Period
 50.00

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 565 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR ALBERT S SCHMIDT 170
 Full Name (Last, First, Middle Initial)
 Mailing Address 490 N 25TH ST
 City CAMP HILL State PA Zip Code 17011
 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 ▼ 252.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2013
Transaction ID : SA11Al.132153
 Amount of Each Receipt this Period
 52.00

B. MS RUTH SCHMIDT 840
 Full Name (Last, First, Middle Initial)
 Mailing Address 4082 W 5700 S
 City ROY State UT Zip Code 84067
 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
 11 / 15 / 2013
Transaction ID : SA11Al.132183
 Amount of Each Receipt this Period
 75.00

C. MS VIRGINIA S SCHMUESER 816
 Full Name (Last, First, Middle Initial)
 Mailing Address 8051 COUNTY ROAD 312
 City NEW CASTLE State CO Zip Code 81647
 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
 12 / 10 / 2013
Transaction ID : SA11Al.132206
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	227.00
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 566 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR GREG SCHNAUTZ 786
 Full Name (Last, First, Middle Initial)
 Mailing Address 760 BYLERPOOL RD
 City Kingsbury State TX Zip Code 78638
 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
 07 / 05 / 2013
Transaction ID : SA11AI.132218
 Amount of Each Receipt this Period
 200.00

B. MR GREG SCHNAUTZ 786
 Full Name (Last, First, Middle Initial)
 Mailing Address 760 BYLERPOOL RD
 City Kingsbury State TX Zip Code 78638
 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 ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 20 / 2013
Transaction ID : SA11AI.132213
 Amount of Each Receipt this Period
 50.00

C. MR GREG SCHNAUTZ 786
 Full Name (Last, First, Middle Initial)
 Mailing Address 760 BYLERPOOL RD
 City Kingsbury State TX Zip Code 78638
 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 M / D D D / Y Y Y Y Y Y
 09 / 06 / 2013
Transaction ID : SA11AI.132217
 Amount of Each Receipt this Period
 100.00

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: PAGE 567 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR GREG SCHNAUTZ 786
 Full Name (Last, First, Middle Initial)
 Mailing Address 760 BYLERPOOL RD
 City Kingsbury State TX Zip Code 78638
 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 ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 20 / 2013
Transaction ID : SA11Al.132216
 Amount of Each Receipt this Period
 50.00

B. MR GREG E SCHNAUTZ 786
 Full Name (Last, First, Middle Initial)
 Mailing Address 760 BYLERPOOL RD
 City Kingsbury State TX Zip Code 78638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SCHNAUTZ FARM Occupation FARMER
 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
 10 / 31 / 2013
Transaction ID : SA11Al.132215
 Amount of Each Receipt this Period
 300.00

C. MRS BARBARA SCHOBER 703
 Full Name (Last, First, Middle Initial)
 Mailing Address 110 MANDALAY WEST DR
 City Houma State LA Zip Code 70360
 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 / 2013
Transaction ID : SA11Al.132277
 Amount of Each Receipt this Period
 100.00

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: PAGE 568 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR ALFRED A SCHROEDER 782
 Full Name (Last, First, Middle Initial)
 Mailing Address 2811 WHISPER FAWN ST
 City SAN ANTONIO State TX Zip Code 78230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SHROEDER AMERICA Occupation BOARD MEMBER
 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 / 2013
Transaction ID : SA11AI.132376
 Amount of Each Receipt this Period
 100.00

B. MR ALFRED A SCHROEDER 782
 Full Name (Last, First, Middle Initial)
 Mailing Address 2811 WHISPER FAWN ST
 City SAN ANTONIO State TX Zip Code 78230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SHROEDER AMERICA Occupation BOARD MEMBER
 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
 12 / 19 / 2013
Transaction ID : SA11AI.132373
 Amount of Each Receipt this Period
 100.00

C. MR PATRICK O SCHUBERT 646
 Full Name (Last, First, Middle Initial)
 Mailing Address 1207 CRAIG LN
 City CARROLLTON State MO Zip Code 64633
 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 ▼ 345.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2013
Transaction ID : SA11AI.132385
 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 569 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MRS ALICE SCHULTE 672			Date of Receipt
Mailing Address 669 WAVERLY ST			<input type="text" value="08"/> / <input type="text" value="22"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11Al.132413
WICHITA	KS	67218	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="150.00"/>
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) ▼			

Full Name (Last, First, Middle Initial) B. MR THOMAS A SCHULTZ 530			Date of Receipt
Mailing Address 4445 PILGRIM RD			<input type="text" value="07"/> / <input type="text" value="05"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11Al.132437
BROOKFIELD	WI	53005	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		
BUTLER NAPPA	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 THOMAS A SCHULTZ 530			Date of Receipt
Mailing Address 4445 PILGRIM RD			<input type="text" value="08"/> / <input type="text" value="02"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11Al.132436
BROOKFIELD	WI	53005	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		
BUTLER NAPPA	RETIRED		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="450.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="250.00"/>
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 570 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR THOMAS A SCHULTZ 530			Date of Receipt M M M / D D D / Y Y Y Y Y Y 08 / 29 / 2013 Transaction ID : SA11AI.132432
Mailing Address 4445 PILGRIM RD			Amount of Each Receipt this Period 50.00
City BROOKFIELD	State WI	Zip Code 53005	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 500.00
Name of Employer BUTLER NAPPA		Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MR THOMAS A SCHULTZ 530			Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 05 / 2013 Transaction ID : SA11AI.132434
Mailing Address 4445 PILGRIM RD			Amount of Each Receipt this Period 50.00
City BROOKFIELD	State WI	Zip Code 53005	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 550.00
Name of Employer BUTLER NAPPA		Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. MR THOMAS A SCHULTZ 530			Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 16 / 2013 Transaction ID : SA11AI.132433
Mailing Address 4445 PILGRIM RD			Amount of Each Receipt this Period 50.00
City BROOKFIELD	State WI	Zip Code 53005	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 600.00
Name of Employer BUTLER NAPPA		Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

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 571 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR THOMAS A SCHULTZ 530		Date of Receipt
Mailing Address 4445 PILGRIM RD		<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2013"/>
City	State	Zip Code
BROOKFIELD	WI	53005
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.132438
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
BUTLER NAPPA	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="650.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MR THOMAS A SCHULTZ 530		Date of Receipt
Mailing Address 4445 PILGRIM RD		<input type="text" value="12"/> / <input type="text" value="05"/> / <input type="text" value="2013"/>
City	State	Zip Code
BROOKFIELD	WI	53005
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.132435
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
BUTLER NAPPA	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) C. MR JOEL R SCHUMACHER 973		Date of Receipt
Mailing Address 38838 SHELburn DR		<input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2013"/>
City	State	Zip Code
SCIO	OR	97374
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.132491
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<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="275.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="150.00"/>
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 572 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR WILLIAM F SCHWENK 283		Date of Receipt M M / D D / Y Y Y Y Y 10 / 11 / 2013 Transaction ID : SA11AI.132547
Mailing Address 39 HIGHLAND VIEW DR		Amount of Each Receipt this Period 150.00
City SOUTHERN PINES	State NC	Zip Code 28387
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation SELF EMPLOYED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. MR WILLIAM F SCHWENK 283		Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2013 Transaction ID : SA11AI.132548
Mailing Address 39 HIGHLAND VIEW DR		Amount of Each Receipt this Period 100.00
City SOUTHERN PINES	State NC	Zip Code 28387
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation SELF EMPLOYED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. MS HELEN SCHWOERER 539		Date of Receipt M M / D D / Y Y Y Y Y 09 / 13 / 2013 Transaction ID : SA11AI.132559
Mailing Address 1301 WATERLOO ST		Amount of Each Receipt this Period 75.00
City COLUMBUS	State WI	Zip Code 53925
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

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:	PAGE 573 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

A. MS HELEN SCHWOERER 539
 Full Name (Last, First, Middle Initial)
 Mailing Address 1301 WATERLOO ST
 City COLUMBUS State WI Zip Code 53925
 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 / 16 / 2013
Transaction ID : SA11Al.132560
 Amount of Each Receipt this Period
 50.00

B. MS GINNA L SCOTT 206
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 371
 City INDIAN HEAD State MD Zip Code 20640
 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 / 22 / 2013
Transaction ID : SA11Al.132576
 Amount of Each Receipt this Period
 400.00

C. MS GINNA L SCOTT 206
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 371
 City INDIAN HEAD State MD Zip Code 20640
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2013
Transaction ID : SA11Al.132577
 Amount of Each Receipt this Period
 400.00

SUBTOTAL of Receipts This Page (optional).....▶	850.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 574 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

A. MS EVA F SCOTT 230
 Full Name (Last, First, Middle Initial)
 Mailing Address 15830 GOODES BRIDGE RD
 City State Zip Code
 AMELIA CT HSE VA 23002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SCOTT TIMBERLAND CO LP BOOKKEEPER
 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 / 2013
Transaction ID : SA11AI.132580
 Amount of Each Receipt this Period
 100.00

B. MS EVA F SCOTT 230
 Full Name (Last, First, Middle Initial)
 Mailing Address 15830 GOODES BRIDGE RD
 City State Zip Code
 AMELIA CT HSE VA 23002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SCOTT TIMBERLAND CO LP BOOKKEEPER
 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 / 26 / 2013
Transaction ID : SA11AI.132579
 Amount of Each Receipt this Period
 50.00

C. MS DORLA J SCOTT 484
 Full Name (Last, First, Middle Initial)
 Mailing Address 12424 N LINDEN RD
 City State Zip Code
 CLIO MI 48420
 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
 12 / 11 / 2013
Transaction ID : SA11AI.132603
 Amount of Each Receipt this Period
 100.00

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 575 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS DOROTHY M SEEL 294
 Full Name (Last, First, Middle Initial)
 Mailing Address 2313 LAZY RIVER DR
 City CHARLESTON State SC Zip Code 29414
 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 ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 30 / 2013
Transaction ID : SA11Al.132746
 Amount of Each Receipt this Period
 50.00

B. MS DOROTHY M SEEL 294
 Full Name (Last, First, Middle Initial)
 Mailing Address 2313 LAZY RIVER DR
 City CHARLESTON State SC Zip Code 29414
 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 ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 26 / 2013
Transaction ID : SA11Al.132747
 Amount of Each Receipt this Period
 100.00

C. MR PAUL SELIGMAN 079
 Full Name (Last, First, Middle Initial)
 Mailing Address 19 OAK PARK DR
 City MORRISTOWN State NJ Zip Code 07960
 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 ▼ 700.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 21 / 2013
Transaction ID : SA11Al.132802
 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 576 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR PAUL SELIGMAN 079
 Full Name (Last, First, Middle Initial)
 Mailing Address 19 OAK PARK DR
 City MORRISTOWN State NJ Zip Code 07960
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2013
Transaction ID : SA11AI.132803
 Amount of Each Receipt this Period
 50.00

B. MS NOLA M SELLENEIT 945
 Full Name (Last, First, Middle Initial)
 Mailing Address 265 DRYDEN DR
 City VALLEJO State CA Zip Code 94591
 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 / 23 / 2013
Transaction ID : SA11AI.132814
 Amount of Each Receipt this Period
 350.00

C. MS NOLA M SELLENEIT 945
 Full Name (Last, First, Middle Initial)
 Mailing Address 265 DRYDEN DR
 City VALLEJO State CA Zip Code 94591
 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
 10 / 07 / 2013
Transaction ID : SA11AI.132815
 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: (check only one)	PAGE 577 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR GEORGE W SEMPLE 787
 Full Name (Last, First, Middle Initial)
 Mailing Address 5906 MESA DR
 City AUSTIN State TX Zip Code 78731
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BLACKBOX NETWORK SERVICES Occupation TECHNICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 300.00

Date of Receipt 07 / 19 / 2013
Transaction ID : SA11AI.132854
 Amount of Each Receipt this Period 200.00

B. MS WILMA S SEWELL 324
 Full Name (Last, First, Middle Initial)
 Mailing Address 2524 PRETTY BAYOU ISLAND DR
 City PANAMA CITY State FL Zip Code 32405
 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 10 / 10 / 2013
Transaction ID : SA11AI.132932
 Amount of Each Receipt this Period 50.00

C. MRS HELEN S SEXTON 430
 Full Name (Last, First, Middle Initial)
 Mailing Address 3534 RIDGEWOOD DR
 City HILLIARD State OH Zip Code 43026
 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 08 / 20 / 2013
Transaction ID : SA11AI.132941
 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 578 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS DANA L SEXTON 740
 Full Name (Last, First, Middle Initial)
 Mailing Address 35024 W 261ST ST S
 City BRISTOW State OK Zip Code 74010
 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 / 06 / 2013
Transaction ID : SA11AI.132946
 Amount of Each Receipt this Period
 100.00

B. MS LOUISE B SHANE 300
 Full Name (Last, First, Middle Initial)
 Mailing Address 1875 BETHANY WAY
 City ALPHARETTA State GA Zip Code 30004
 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
 11 / 18 / 2013
Transaction ID : SA11AI.133029
 Amount of Each Receipt this Period
 100.00

C. MS DELORES T SHEEHAN 530
 Full Name (Last, First, Middle Initial)
 Mailing Address W269N2714 LELAH AVE
 City PEWAUKEE State WI Zip Code 53072
 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
 12 / 11 / 2013
Transaction ID : SA11AI.133170
 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 579 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS PATRICIA M SHEFFIELD 775
 Full Name (Last, First, Middle Initial)
 Mailing Address 2930 COVE VIEW DR
 City SEABROOK State TX Zip Code 77586
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 20 / 2013
Transaction ID : SA11AI.133202
 Amount of Each Receipt this Period
 100.00

B. MS PATRICIA M SHEFFIELD 775
 Full Name (Last, First, Middle Initial)
 Mailing Address 2930 COVE VIEW DR
 City SEABROOK State TX Zip Code 77586
 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 ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2013
Transaction ID : SA11AI.133201
 Amount of Each Receipt this Period
 50.00

C. MR ROBERT H SHEIDLER 988
 Full Name (Last, First, Middle Initial)
 Mailing Address 242 NOB HILL DR
 City EPHRATA State WA Zip Code 98823
 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
 10 / 17 / 2013
Transaction ID : SA11AI.133205
 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: (check only one)	PAGE 580 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS DANIELLE S SHERMAN 338		Date of Receipt
Mailing Address 420 OSCEOLA AVE		<input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2013"/>
City	State	Zip Code
FROSTPROOF	FL	33843
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="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>

Full Name (Last, First, Middle Initial) B. MS DANIELLE S SHERMAN 338		Date of Receipt
Mailing Address 420 OSCEOLA AVE		<input type="text" value="12"/> / <input type="text" value="26"/> / <input type="text" value="2013"/>
City	State	Zip Code
FROSTPROOF	FL	33843
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="checkbox"/> Other (specify) ▼	<input type="text" value="400.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>

Full Name (Last, First, Middle Initial) C. MR JOHN R SHIDELER 816		Date of Receipt
Mailing Address 9667 COUNTY ROAD 315		<input type="text" value="08"/> / <input type="text" value="26"/> / <input type="text" value="2013"/>
City	State	Zip Code
SILT	CO	81652
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
SELF EMPLOYED	RANCHER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="375.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="225.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="425.00"/>
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 581 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MRS NANCY SHOUSE 424
 Full Name (Last, First, Middle Initial)
 Mailing Address 1900 STATE ROUTE 492
 City MORGANFIELD State KY Zip Code 42437
 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 ▼ 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 18 / 2013
Transaction ID : SA11Al.133437
 Amount of Each Receipt this Period
 50.00

B. MR ROLLAND M SHREVES 922
 Full Name (Last, First, Middle Initial)
 Mailing Address 5345 SUNBURST ST
 City JOSHUA TREE State CA Zip Code 92252
 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
 10 / 10 / 2013
Transaction ID : SA11Al.133446
 Amount of Each Receipt this Period
 50.00

C. MRS NANCY M SHUKAITIS 183
 Full Name (Last, First, Middle Initial)
 Mailing Address RR 5 BOX 5432
 City EAST STROUDSBURG State PA Zip Code 18301
 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 ▼ 215.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 05 / 2013
Transaction ID : SA11Al.133468
 Amount of Each Receipt this Period
 50.00

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: PAGE 582 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MRS NANCY M SHUKAITIS 183
 Full Name (Last, First, Middle Initial)
 Mailing Address RR 5 BOX 5432
 City EAST STROUDSBURG State PA Zip Code 18301
 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 / D D / Y Y Y Y Y Y
 09 / 23 / 2013
Transaction ID : SA11Al.133466
 Amount of Each Receipt this Period
 50.00

B. BETTEANN SIANO 321
 Full Name (Last, First, Middle Initial)
 Mailing Address 464 MINSHEW RD
 City PIERSON State FL Zip Code 32180
 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 ▼ 216.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 09 / 2013
Transaction ID : SA11Al.133511
 Amount of Each Receipt this Period
 50.00

C. MR RICHARD C SIEGFRIED 852
 Full Name (Last, First, Middle Initial)
 Mailing Address 6150 S RURAL RD APT 124
 City TEMPE State AZ Zip Code 85283
 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
 12 / 09 / 2013
Transaction ID : SA11Al.133558
 Amount of Each Receipt this Period
 125.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
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 583 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. DUWAYNE J SIMMONS 563
 Full Name (Last, First, Middle Initial)
 Mailing Address 2011 4TH AVE N
 City SAUK RAPIDS State MN Zip Code 56379
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SIMMONS CONSTRUCTION LLC Occupation BUILDER
 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
 11 / 22 / 2013
Transaction ID : SA11AI.133654
 Amount of Each Receipt this Period
 150.00

B. MRS DOLORES A SIRON 617
 Full Name (Last, First, Middle Initial)
 Mailing Address 1411 CLOUD ST
 City BLOOMINGTON State IL Zip Code 61701
 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 / 13 / 2013
Transaction ID : SA11AI.133797
 Amount of Each Receipt this Period
 100.00

C. MRS DOLORES A SIRON 617
 Full Name (Last, First, Middle Initial)
 Mailing Address 1411 CLOUD ST
 City BLOOMINGTON State IL Zip Code 61701
 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
 12 / 12 / 2013
Transaction ID : SA11AI.133796
 Amount of Each Receipt this Period
 100.00

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: PAGE 584 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR RONALD O SKABAR 339
 Full Name (Last, First, Middle Initial)
 Mailing Address 107 SW 51ST TER
 City CAPE CORAL State FL Zip Code 33914
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RONALD O SKABAR LLC Occupation PRINCIPAL
 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 / 2013
Transaction ID : SA11AI.133825
 Amount of Each Receipt this Period
 150.00

B. MS REBECCA L SKAGGS 431
 Full Name (Last, First, Middle Initial)
 Mailing Address 6758 DARBY BLVD
 City GROVE CITY State OH Zip Code 43123
 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 / 22 / 2013
Transaction ID : SA11AI.133826
 Amount of Each Receipt this Period
 150.00

C. MS REBECCA L SKAGGS 431
 Full Name (Last, First, Middle Initial)
 Mailing Address 6758 DARBY BLVD
 City GROVE CITY State OH Zip Code 43123
 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
 10 / 23 / 2013
Transaction ID : SA11AI.133827
 Amount of Each Receipt this Period
 200.00

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 585 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS MARY SLAGEL 617
 Full Name (Last, First, Middle Initial)
 Mailing Address 12 TIMBER RIDGE DR
 City FAIRBURY State IL Zip Code 61739
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation UNEMPLOYED
 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
 10 / 14 / 2013
Transaction ID : SA11AI.133918
 Amount of Each Receipt this Period
 100.00

B. MS BRENDA SLUYTER 939
 Full Name (Last, First, Middle Initial)
 Mailing Address 25850 N MESA DR
 City CARMEL State CA Zip Code 93923
 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 / 16 / 2013
Transaction ID : SA11AI.133995
 Amount of Each Receipt this Period
 150.00

C. MS BRENDA SLUYTER 939
 Full Name (Last, First, Middle Initial)
 Mailing Address 25850 N MESA DR
 City CARMEL State CA Zip Code 93923
 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
 10 / 16 / 2013
Transaction ID : SA11AI.133996
 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 586 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MRS CHRISTINE SMITH 068
 Full Name (Last, First, Middle Initial)
 Mailing Address 87 LORDS HWY
 City WESTON State CT Zip Code 06883
 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 ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2013
Transaction ID : SA11AI.134048
 Amount of Each Receipt this Period
 500.00

B. MR BLAINE E SMITH 261
 Full Name (Last, First, Middle Initial)
 Mailing Address 189 TYLER HWY
 City SISTERSVILLE State WV Zip Code 26175
 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 / 01 / 2013
Transaction ID : SA11AI.134093
 Amount of Each Receipt this Period
 50.00

C. MS MARGARET SMITH 391
 Full Name (Last, First, Middle Initial)
 Mailing Address 348 RED EAGLE CIR
 City RIDGELAND State MS Zip Code 39157
 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 / 30 / 2013
Transaction ID : SA11AI.134184
 Amount of Each Receipt this Period
 150.00

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: PAGE 587 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS ARLENE SMITH 489
 Full Name (Last, First, Middle Initial)
 Mailing Address 2400 WOODVIEW DR
 City LANSING State MI Zip Code 48911
 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 / 14 / 2013
Transaction ID : SA11AI.134239
 Amount of Each Receipt this Period
 50.00

B. MS HELEN W SMITH 631
 Full Name (Last, First, Middle Initial)
 Mailing Address 629 W ROSE HILL AVE
 City SAINT LOUIS State MO Zip Code 63122
 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 / 2013
Transaction ID : SA11AI.134277
 Amount of Each Receipt this Period
 150.00

C. MS HELEN W SMITH 631
 Full Name (Last, First, Middle Initial)
 Mailing Address 629 W ROSE HILL AVE
 City SAINT LOUIS State MO Zip Code 63122
 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
 12 / 11 / 2013
Transaction ID : SA11AI.134278
 Amount of Each Receipt this Period
 225.00

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 588 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR BOB L SMITH 665
 Full Name (Last, First, Middle Initial)
 Mailing Address 2232 MEADOWLARK RD
 City State Zip Code
 MANHATTAN KS 66502
 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 ▼
 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 02 / 2013
Transaction ID : SA11AI.134295
 Amount of Each Receipt this Period
 100.00

B. MR BOB L SMITH 665
 Full Name (Last, First, Middle Initial)
 Mailing Address 2232 MEADOWLARK RD
 City State Zip Code
 MANHATTAN KS 66502
 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
 12 / 11 / 2013
Transaction ID : SA11AI.134294
 Amount of Each Receipt this Period
 25.00

C. MS LORETTA J SMITH 791
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 BRENNAN CT
 City State Zip Code
 AMARILLO TX 79121
 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 / 23 / 2013
Transaction ID : SA11AI.134385
 Amount of Each Receipt this Period
 125.00

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 589 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS LORETTA J SMITH 791
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 BRENNAN CT
 City State Zip Code
 AMARILLO TX 79121
 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 ▼
 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2013
Transaction ID : SA11AI.134383
 Amount of Each Receipt this Period
 50.00

B. MR PHILIP T SMITH 804
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 146
 City State Zip Code
 JAMESTOWN CO 80455
 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 ▼
 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2013
Transaction ID : SA11AI.134393
 Amount of Each Receipt this Period
 175.00

C. MR PHILIP T SMITH 804
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 146
 City State Zip Code
 JAMESTOWN CO 80455
 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 ▼
 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2013
Transaction ID : SA11AI.134394
 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 590 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS PATRICIA K SMITH 922
 Full Name (Last, First, Middle Initial)
 Mailing Address 79690 RANCHO LA QUINTA DR
 City LA QUINTA State CA Zip Code 92253
 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 / 01 / 2013
Transaction ID : SA11AI.134450
 Amount of Each Receipt this Period
 150.00

B. MR EMMETT L SMITH 956
 Full Name (Last, First, Middle Initial)
 Mailing Address 4126 BUCHANAN DR
 City FAIR OAKS State CA Zip Code 95628
 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
 11 / 28 / 2013
Transaction ID : SA11AI.134470
 Amount of Each Receipt this Period
 100.00

C. MR ROBERT L SNIVELY 808
 Full Name (Last, First, Middle Initial)
 Mailing Address 804 CALLE DE LA NIEVA
 City FLORISSANT State CO Zip Code 80816
 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
 07 / 30 / 2013
Transaction ID : SA11AI.134550
 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: (check only one)	PAGE 591 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR DAVID SNYDER 891
 Full Name (Last, First, Middle Initial)
 Mailing Address 5941 N BRONCO ST
 City LAS VEGAS State NV Zip Code 89130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ENCORE RESTAURANT Occupation CHEF
 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 / 24 / 2013
Transaction ID : SA11AI.134610
 Amount of Each Receipt this Period
 75.00

B. MR MICHAEL SOBER 967
 Full Name (Last, First, Middle Initial)
 Mailing Address 91-458 KOMOHANA ST
 City KAPOLEI State HI Zip Code 96707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 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
 12 / 30 / 2013
Transaction ID : SA11AI.134612
 Amount of Each Receipt this Period
 225.00

C. MR GARY SOLLARS 730
 Full Name (Last, First, Middle Initial)
 Mailing Address 116 S BICKFORD AVE
 City EL RENO State OK Zip Code 73036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2013
Transaction ID : SA11AI.134649
 Amount of Each Receipt this Period
 175.00

SUBTOTAL of Receipts This Page (optional).....▶	475.00
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 592 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR JOSEPH A SOMERS 544
 Full Name (Last, First, Middle Initial)
 Mailing Address 5458 OLD HIGHWAY 18
 City STEVENS POINT State WI Zip Code 54482
 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
 11 / 25 / 2013
Transaction ID : SA11AI.134673
 Amount of Each Receipt this Period
 100.00

B. MR OLIVER S SOSELY 088
 Full Name (Last, First, Middle Initial)
 Mailing Address 604 FAIRVIEW AVE
 City MIDDLESEX State NJ Zip Code 08846
 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
 11 / 26 / 2013
Transaction ID : SA11AI.134726
 Amount of Each Receipt this Period
 100.00

C. MS MARIAN SOWELL 720
 Full Name (Last, First, Middle Initial)
 Mailing Address 2844 COW PATTY TRL
 City ALEXANDER State AR Zip Code 72002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ARKANSAS DEPT OF HEALTH Occupation HEALTHCARE
 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
 10 / 16 / 2013
Transaction ID : SA11AI.134780
 Amount of Each Receipt this Period
 5.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 205.00
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 593 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS RUTH G SPANN 333		Date of Receipt
Mailing Address 7212 E TROPICAL WAY		<input type="text" value="07"/> / <input type="text" value="05"/> / <input type="text" value="2013"/>
City	State	Zip Code
PLANTATION	FL	33317
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.134803
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="325.00"/>	

Full Name (Last, First, Middle Initial) B. MS RUTH G SPANN 333		Date of Receipt
Mailing Address 7212 E TROPICAL WAY		<input type="text" value="08"/> / <input type="text" value="27"/> / <input type="text" value="2013"/>
City	State	Zip Code
PLANTATION	FL	33317
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.134806
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="425.00"/>	

Full Name (Last, First, Middle Initial) C. MS RUTH G SPANN 333		Date of Receipt
Mailing Address 7212 E TROPICAL WAY		<input type="text" value="08"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City	State	Zip Code
PLANTATION	FL	33317
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.134805
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="475.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="175.00"/>
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 594 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

A. MS RUTH G SPANN 333
 Full Name (Last, First, Middle Initial)
 Mailing Address 7212 E TROPICAL WAY
 City PLANTATION State FL Zip Code 33317
 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 ▼ 575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 27 / 2013
Transaction ID : SA11AI.134804
 Amount of Each Receipt this Period
 100.00

B. MS CELIA SPEECE 971
 Full Name (Last, First, Middle Initial)
 Mailing Address 149 NW 25TH ST
 City MCMINNVILLE State OR Zip Code 97128
 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
 10 / 14 / 2013
Transaction ID : SA11AI.134854
 Amount of Each Receipt this Period
 50.00

C. MR WILLIAM N SPELLACY 335
 Full Name (Last, First, Middle Initial)
 Mailing Address 516 MIRABAY BLVD
 City APOLLO BEACH State FL Zip Code 33572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 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 / 15 / 2013
Transaction ID : SA11AI.134870
 Amount of Each Receipt this Period
 75.00

SUBTOTAL of Receipts This Page (optional).....▶	225.00
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 595 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR WILLIAM N SPELLACY 335
 Full Name (Last, First, Middle Initial)
 Mailing Address 516 MIRABAY BLVD
 City APOLLO BEACH State FL Zip Code 33572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 09 / 2013
Transaction ID : SA11AI.134872
 Amount of Each Receipt this Period
 50.00

B. MR WILLIAM N SPELLACY 335
 Full Name (Last, First, Middle Initial)
 Mailing Address 516 MIRABAY BLVD
 City APOLLO BEACH State FL Zip Code 33572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 09 / 2013
Transaction ID : SA11AI.134871
 Amount of Each Receipt this Period
 50.00

C. MR DONALD SPENCE 930
 Full Name (Last, First, Middle Initial)
 Mailing Address 284 PACOS ST
 City VENTURA State CA Zip Code 93001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 14 / 2013
Transaction ID : SA11AI.134885
 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 596 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS BARBARA SPILLMAN 707
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 1187
 City SAINT FRANCISVILLE State LA Zip Code 70775
 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 ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2013
Transaction ID : SA11AI.134944
 Amount of Each Receipt this Period
 50.00

B. MS JANET H SPOON 286
 Full Name (Last, First, Middle Initial)
 Mailing Address 118 BEALL ST NW
 City LENOIR State NC Zip Code 28645
 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
 10 / 02 / 2013
Transaction ID : SA11AI.134973
 Amount of Each Receipt this Period
 50.00

C. MS JANET H SPOON 286
 Full Name (Last, First, Middle Initial)
 Mailing Address 118 BEALL ST NW
 City LENOIR State NC Zip Code 28645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 11 / 2013
Transaction ID : SA11AI.134974
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
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 597 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR DONALD L SPRAGUE 745		Date of Receipt
Mailing Address PO BOX 223		<input type="text" value="11"/> / <input type="text" value="18"/> / <input type="text" value="2013"/>
City	State	Zip Code
COALGATE	OK	74538
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.134989
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<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. MS ELIZABETH H SPROUSE 241		Date of Receipt
Mailing Address 303 LAKERIDGE CIR		<input type="text" value="09"/> / <input type="text" value="06"/> / <input type="text" value="2013"/>
City	State	Zip Code
TROUTVILLE	VA	24175
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.135014
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<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="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MS JUDY STAAB 461		Date of Receipt
Mailing Address 3363 NOTTINGHILL DR W		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2013"/>
City	State	Zip Code
PLAINFIELD	IN	46168
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.135042
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<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="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="275.00"/>
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 598 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR BERNARD A STAHL 108
 Full Name (Last, First, Middle Initial)
 Mailing Address 1270 NORTH AVE
 City NEW ROCHELLE State NY Zip Code 10804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TECHNOLOGIES Occupation SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2013
Transaction ID : SA11AI.135109
 Amount of Each Receipt this Period
 100.00

B. MR BERNARD A STAHL 108
 Full Name (Last, First, Middle Initial)
 Mailing Address 1270 NORTH AVE
 City NEW ROCHELLE State NY Zip Code 10804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TECHNOLOGIES Occupation SELF EMPLOYED
 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
 08 / 21 / 2013
Transaction ID : SA11AI.135110
 Amount of Each Receipt this Period
 100.00

C. MR BERNARD A STAHL 108
 Full Name (Last, First, Middle Initial)
 Mailing Address 1270 NORTH AVE
 City NEW ROCHELLE State NY Zip Code 10804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TECHNOLOGIES Occupation SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 03 / 2013
Transaction ID : SA11AI.135111
 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 599 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR BERNARD A STAHL 108
 Full Name (Last, First, Middle Initial)
 Mailing Address 1270 NORTH AVE
 City NEW ROCHELLE State NY Zip Code 10804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TECHNOLOGIES Occupation SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 18 / 2013
Transaction ID : SA11AI.135112
 Amount of Each Receipt this Period
 50.00

B. MR JACK STATEN 897
 Full Name (Last, First, Middle Initial)
 Mailing Address 24 CASH DR
 City MOUND HOUSE State NV Zip Code 89706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 03 / 2013
Transaction ID : SA11AI.135289
 Amount of Each Receipt this Period
 100.00

C. MR JACK STATEN 897
 Full Name (Last, First, Middle Initial)
 Mailing Address 24 CASH DR
 City MOUND HOUSE State NV Zip Code 89706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 17 / 2013
Transaction ID : SA11AI.135290
 Amount of Each Receipt this Period
 100.00

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 600 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS MARY E STEADMAN 757		Date of Receipt
Mailing Address 2435 HOMESTEAD LN		<input type="text" value="08"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Zip Code
TYLER	TX	75701
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.135314
Name of Employer	Occupation	Amount of Each Receipt this Period
REFUSED TO GIVE	ASSISTANT MANAGER	<input type="text" value="100.00"/>
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) B. MS GAY STEADMAN 801		Date of Receipt
Mailing Address 5200 SEDONA DR		<input type="text" value="08"/> / <input type="text" value="27"/> / <input type="text" value="2013"/>
City	State	Zip Code
PARKER	CO	80134
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.135317
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	HOMEMAKER	<input type="text" value="150.00"/>
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 GAY STEADMAN 801		Date of Receipt
Mailing Address 5200 SEDONA DR		<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2013"/>
City	State	Zip Code
PARKER	CO	80134
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.135318
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	HOMEMAKER	<input type="text" value="75.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="475.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="325.00"/>
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 601 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS LYNN STECKLINE 800
 Full Name (Last, First, Middle Initial)
 Mailing Address 2813 S TRUCKEE ST
 City AURORA State CO Zip Code 80013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NURSE Occupation HEALTH CARE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2013
Transaction ID : SA11AI.135324
 Amount of Each Receipt this Period 100.00

B. MR CHARLES M STEEHLER 145
 Full Name (Last, First, Middle Initial)
 Mailing Address 5505 GATES DR
 City WILLIAMSON State NY Zip Code 14589
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PANARAMA COLLISION Occupation ADJUSTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 21 / 2013
Transaction ID : SA11AI.135333
 Amount of Each Receipt this Period 100.00

C. MR MARK A STEINC 224
 Full Name (Last, First, Middle Initial)
 Mailing Address 7435 COMORN RD
 City KING GEORGE State VA Zip Code 22485
 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 08 / 12 / 2013
Transaction ID : SA11AI.135402
 Amount of Each Receipt this Period 150.00

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: PAGE 602 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR MARK A STEINC 224
 Full Name (Last, First, Middle Initial)
 Mailing Address 7435 COMORN RD
 City KING GEORGE State VA Zip Code 22485
 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 / D D / Y Y Y Y Y Y
 11 / 18 / 2013
Transaction ID : SA11AI.135403
 Amount of Each Receipt this Period
 100.00

B. MR JEFFREY STEINKAMP 057
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 98
 City ROCHESTER State VT Zip Code 05767
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 09 / 2013
Transaction ID : SA11AI.135418
 Amount of Each Receipt this Period
 250.00

C. MR JEFFREY STEINKAMP 057
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 98
 City ROCHESTER State VT Zip Code 05767
 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 ▼ 450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2013
Transaction ID : SA11AI.135419
 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 603 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR JEFFREY STEINKAMP 057		Date of Receipt
Mailing Address PO BOX 98		<input type="text" value="12"/> / <input type="text" value="12"/> / <input type="text" value="2013"/>
City	State	Zip Code
ROCHESTER	VT	05767
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.135417
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="550.00"/>	

Full Name (Last, First, Middle Initial) B. MR WILLIAM G STEL 917		Date of Receipt
Mailing Address 23833 PROSPECT VALLEY DR		<input type="text" value="07"/> / <input type="text" value="08"/> / <input type="text" value="2013"/>
City	State	Zip Code
DIAMOND BAR	CA	91765
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.135426
Name of Employer	Occupation	Amount of Each Receipt this Period
PORT OF LA HARBOR DEPT	PORT EMPLOYEE	<input type="text" value="225.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="375.00"/>	

Full Name (Last, First, Middle Initial) C. MR WILLIAM G STEL 917		Date of Receipt
Mailing Address 23833 PROSPECT VALLEY DR		<input type="text" value="12"/> / <input type="text" value="13"/> / <input type="text" value="2013"/>
City	State	Zip Code
DIAMOND BAR	CA	91765
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.135427
Name of Employer	Occupation	Amount of Each Receipt this Period
PORT OF LA HARBOR DEPT	PORT EMPLOYEE	<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="675.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="625.00"/>
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 604 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

A. MS SARAH T STEPHENSON 068
 Full Name (Last, First, Middle Initial)
 Mailing Address 114 W LYON FARM DR
 City GREENWICH State CT Zip Code 06831
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 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 / 12 / 2013
Transaction ID : SA11AI.135494
 Amount of Each Receipt this Period
 150.00

B. MS SARAH T STEPHENSON 068
 Full Name (Last, First, Middle Initial)
 Mailing Address 114 W LYON FARM DR
 City GREENWICH State CT Zip Code 06831
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 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
 11 / 18 / 2013
Transaction ID : SA11AI.135493
 Amount of Each Receipt this Period
 150.00

C. MR JAMES F STEPHENSON 469
 Full Name (Last, First, Middle Initial)
 Mailing Address 6634 N 150 W
 City DENVER State IN Zip Code 46926
 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
 07 / 01 / 2013
Transaction ID : SA11AI.135502
 Amount of Each Receipt this Period
 50.00

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: PAGE 605 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR JAMES F STEPHENSON 469
 Full Name (Last, First, Middle Initial)
 Mailing Address 6634 N 150 W
 City DENVER State IN Zip Code 46926
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 08 / 19 / 2013
Transaction ID : SA11AI.135501
 Amount of Each Receipt this Period
 50.00

B. MR JAMES F STEPHENSON 469
 Full Name (Last, First, Middle Initial)
 Mailing Address 6634 N 150 W
 City DENVER State IN Zip Code 46926
 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 / 20 / 2013
Transaction ID : SA11AI.135504
 Amount of Each Receipt this Period
 25.00

C. MR JAMES F STEPHENSON 469
 Full Name (Last, First, Middle Initial)
 Mailing Address 6634 N 150 W
 City DENVER State IN Zip Code 46926
 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
 09 / 23 / 2013
Transaction ID : SA11AI.135503
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
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 606 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MRS GRACE STETZER 322
Full Name (Last, First, Middle Initial)

Mailing Address 8629 LA LOSA DR W

City JACKSONVILLE State FL Zip Code 32217

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 / 18 / 2013
Transaction ID : SA11AI.135542

Amount of Each Receipt this Period
 60.00

B. MRS GRACE STETZER 322
Full Name (Last, First, Middle Initial)

Mailing Address 8629 LA LOSA DR W

City JACKSONVILLE State FL Zip Code 32217

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 ▼
305.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2013
Transaction ID : SA11AI.135544

Amount of Each Receipt this Period
 100.00

C. MRS GRACE STETZER 322
Full Name (Last, First, Middle Initial)

Mailing Address 8629 LA LOSA DR W

City JACKSONVILLE State FL Zip Code 32217

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 ▼
365.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 17 / 2013
Transaction ID : SA11AI.135543

Amount of Each Receipt this Period
 60.00

SUBTOTAL of Receipts This Page (optional).....▶	220.00
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 607 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR PHILLIP T STEVENSON 501
 Full Name (Last, First, Middle Initial)
 Mailing Address 1121 ORCHARD AVE
 City LAMONI State IA Zip Code 50140
 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 / 12 / 2013
Transaction ID : SA11AI.135598
 Amount of Each Receipt this Period
 100.00

B. MR PHILLIP T STEVENSON 501
 Full Name (Last, First, Middle Initial)
 Mailing Address 1121 ORCHARD AVE
 City LAMONI State IA Zip Code 50140
 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
 10 / 14 / 2013
Transaction ID : SA11AI.135599
 Amount of Each Receipt this Period
 100.00

C. MR MICHAEL H STEWART 334
 Full Name (Last, First, Middle Initial)
 Mailing Address 8684 SE KEATHLEY CT
 City HOBE SOUND State FL Zip Code 33455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 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
 10 / 10 / 2013
Transaction ID : SA11AI.135629
 Amount of Each Receipt this Period
 200.00

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 608 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR MERL F STEWART 897
 Full Name (Last, First, Middle Initial)
 Mailing Address 5365 FRANKTOWN RD
 City CARSON CITY State NV Zip Code 89704
 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
 12 / 16 / 2013
Transaction ID : SA11AI.135689
 Amount of Each Receipt this Period
 50.00

B. MRS GENEVA L STICH 667
 Full Name (Last, First, Middle Initial)
 Mailing Address 7335 140TH RD
 City CHANUTE State KS Zip Code 66720
 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 / 2013
Transaction ID : SA11AI.135696
 Amount of Each Receipt this Period
 100.00

C. MRS GENEVA L STICH 667
 Full Name (Last, First, Middle Initial)
 Mailing Address 7335 140TH RD
 City CHANUTE State KS Zip Code 66720
 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 / 03 / 2013
Transaction ID : SA11AI.135700
 Amount of Each Receipt this Period
 100.00

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 609 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS ELIZABETH M STINES 138		Date of Receipt
Mailing Address 180 HILLSIDE DR		<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2013"/>
City	State	Zip Code
ONEONTA	NY	13820
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.135741
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="50.00"/>
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. MS JEAN STOREY 973		Date of Receipt
Mailing Address PO BOX 267		<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2013"/>
City	State	Zip Code
JEFFERSON	OR	97352
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.135895
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="50.00"/>
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) C. MS JEAN STOREY 973		Date of Receipt
Mailing Address PO BOX 267		<input type="text" value="12"/> / <input type="text" value="13"/> / <input type="text" value="2013"/>
City	State	Zip Code
JEFFERSON	OR	97352
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.135894
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	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="175.00"/>
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 610 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR HAROLD STRAIT 800
 Full Name (Last, First, Middle Initial)
 Mailing Address 141 N ELK CT
 City AURORA State CO Zip Code 80018
 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
 08 / 26 / 2013
Transaction ID : SA11AI.135967
 Amount of Each Receipt this Period
 30.00

B. MS BRENDA S STRANGE 475
 Full Name (Last, First, Middle Initial)
 Mailing Address 20008 US HIGHWAY 231
 City LOOGOOTEE State IN Zip Code 47553
 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 / 11 / 2013
Transaction ID : SA11AI.135979
 Amount of Each Receipt this Period
 100.00

C. MS BRENDA S STRANGE 475
 Full Name (Last, First, Middle Initial)
 Mailing Address 20008 US HIGHWAY 231
 City LOOGOOTEE State IN Zip Code 47553
 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
 11 / 07 / 2013
Transaction ID : SA11AI.135981
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 180.00
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 611 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS ADA STRASENBURGH 082
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 608
 City OCEAN VIEW State NJ Zip Code 08230
 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 / D D / Y Y Y Y Y Y
 08 / 14 / 2013
Transaction ID : SA11AI.135986
 Amount of Each Receipt this Period
 100.00

B. MS ADA STRASENBURGH 082
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 608
 City OCEAN VIEW State NJ Zip Code 08230
 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
 M M / D D / Y Y Y Y Y Y
 09 / 17 / 2013
Transaction ID : SA11AI.135989
 Amount of Each Receipt this Period
 100.00

C. MS ADA STRASENBURGH 082
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 608
 City OCEAN VIEW State NJ Zip Code 08230
 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 ▼ 380.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 16 / 2013
Transaction ID : SA11AI.135987
 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 612 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

A. MS ADA STRASENBURGH 082
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 608
 City OCEAN VIEW State NJ Zip Code 08230
 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
 M M M / D D D / Y Y Y Y Y Y
 11 / 18 / 2013
Transaction ID : SA11AI.135988
 Amount of Each Receipt this Period
 100.00

B. AVONDALE STREET 725
 Full Name (Last, First, Middle Initial)
 Mailing Address 143 ARKANSAS 115
 City CAVE CITY State AR Zip Code 72521
 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
 11 / 22 / 2013
Transaction ID : SA11AI.136025
 Amount of Each Receipt this Period
 30.00

C. MS CARLA L STRIPLING 334
 Full Name (Last, First, Middle Initial)
 Mailing Address 7606 PINE TREE LN
 City WEST PALM BEACH State FL Zip Code 33406
 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 / 11 / 2013
Transaction ID : SA11AI.136067
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	230.00
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 613 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS CARLA L STRIPLING 334
 Full Name (Last, First, Middle Initial)
 Mailing Address 7606 PINE TREE LN
 City WEST PALM BEACH State FL Zip Code 33406
 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 / 24 / 2013
Transaction ID : SA11AI.136068
 Amount of Each Receipt this Period
 75.00

B. MS CARLA L STRIPLING 334
 Full Name (Last, First, Middle Initial)
 Mailing Address 7606 PINE TREE LN
 City WEST PALM BEACH State FL Zip Code 33406
 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
 09 / 11 / 2013
Transaction ID : SA11AI.136069
 Amount of Each Receipt this Period
 100.00

C. MS DOROTHY E STRONG 510
 Full Name (Last, First, Middle Initial)
 Mailing Address 1825 DELAWARE AVE
 City BRONSON State IA Zip Code 51007
 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
 10 / 10 / 2013
Transaction ID : SA11AI.136090
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
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 614 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS DOROTHY E STRONG 510
 Full Name (Last, First, Middle Initial)
 Mailing Address 1825 DELAWARE AVE
 City BRONSON State IA Zip Code 51007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 16 / 2013
Transaction ID : SA11AI.136089
 Amount of Each Receipt this Period
 25.00

B. MR TOM M STROTHER 752
 Full Name (Last, First, Middle Initial)
 Mailing Address 7726 MARQUETTE ST
 City DALLAS State TX Zip Code 75225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MCGUIRE CRADDOCK & STROTHER PC Occupation ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 25 / 2013
Transaction ID : SA11AI.136096
 Amount of Each Receipt this Period
 300.00

C. MR KENNETH J STUDEMAN 490
 Full Name (Last, First, Middle Initial)
 Mailing Address 65523 N CENTERVILLE RD
 City STURGIS State MI Zip Code 49091
 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 ▼ 850.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 25 / 2013
Transaction ID : SA11AI.136145
 Amount of Each Receipt this Period
 100.00

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 615 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS MARY SUKUP 504		Date of Receipt
Mailing Address 1379 BEEDS LAKE DR		<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2013"/>
City	State	Zip Code
HAMPTON	IA	50441
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.136236
Name of Employer	Occupation	Amount of Each Receipt this Period
SUKUP MANUFACTURING CO	CORPORATE SECRETARY	<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="400.00"/>	

Full Name (Last, First, Middle Initial) B. MS JANE H SULLIVAN 372		Date of Receipt
Mailing Address 6104 CHICKERING CT		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2013"/>
City	State	Zip Code
NASHVILLE	TN	37215
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.136251
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="290.00"/>	

Full Name (Last, First, Middle Initial) C. MS MARGARET A SUMMERS 505		Date of Receipt
Mailing Address 719 1ST AVE NE		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2013"/>
City	State	Zip Code
CLARION	IA	50525
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.136299
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="40.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="220.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="540.00"/>
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 616 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS DANA C SUN 932
Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 276

City THREE RIVERS	State CA	Zip Code 93271
----------------------	-------------	-------------------

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

Name of Employer CAREGIVER	Occupation VOLUNTEER
-------------------------------	-------------------------

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	/	10	/	2013

Transaction ID : SA11Al.136311

Amount of Each Receipt this Period
300.00

B. MS DANA C SUN 932
Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 276

City THREE RIVERS	State CA	Zip Code 93271
----------------------	-------------	-------------------

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

Name of Employer CAREGIVER	Occupation VOLUNTEER
-------------------------------	-------------------------

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
12	/	11	/	2013

Transaction ID : SA11Al.136312

Amount of Each Receipt this Period
100.00

C. ROZENE R SUPPLE 922
Full Name (Last, First, Middle Initial)
Mailing Address 1850 SMOKE TREE LN

City PALM SPRINGS	State CA	Zip Code 92264
----------------------	-------------	-------------------

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

Name of Employer RR RADIO CORP	Occupation BROADCASTER
-----------------------------------	---------------------------

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
07	/	15	/	2013

Transaction ID : SA11Al.136328

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: PAGE 617 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. ROZENE R SUPPLE 922
 Full Name (Last, First, Middle Initial)
 Mailing Address 1850 SMOKE TREE LN
 City PALM SPRINGS State CA Zip Code 92264
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RR RADIO CORP Occupation BROADCASTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2013
Transaction ID : SA11AI.136329
 Amount of Each Receipt this Period
 100.00

B. MS EDITH SVENSON 595
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 72
 City JOPLIN State MT Zip Code 59531
 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
 07 / 08 / 2013
Transaction ID : SA11AI.136389
 Amount of Each Receipt this Period
 100.00

C. MS MICHELE B SWAIN 245
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 3425
 City DANVILLE State VA Zip Code 24543
 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
 12 / 16 / 2013
Transaction ID : SA11AI.136406
 Amount of Each Receipt this Period
 95.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 295.00
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 618 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR WILLIAM SWAN 193
 Full Name (Last, First, Middle Initial)
 Mailing Address 481 EATON WAY
 City WEST CHESTER State PA Zip Code 19380
 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 / 19 / 2013
Transaction ID : SA11AI.136414
 Amount of Each Receipt this Period
 25.00

B. MR MAX SWARTZ 172
 Full Name (Last, First, Middle Initial)
 Mailing Address 247 CARLISLE RD
 City NEWVILLE State PA Zip Code 17241
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REFUSED Occupation REFUSED
 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
 12 / 11 / 2013
Transaction ID : SA11AI.136458
 Amount of Each Receipt this Period
 100.00

C. MR PEYTON SWEENEY 786
 Full Name (Last, First, Middle Initial)
 Mailing Address 20547 HIGHLAND LAKE DR
 City LAGO VISTA State TX Zip Code 78645
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2013
Transaction ID : SA11AI.136503
 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 619 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR DREW TACHELLA 070
 Full Name (Last, First, Middle Initial)
 Mailing Address 1002 US HIGHWAY 9 N
 City State Zip Code
 WOODBRIDGE NJ 07095
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 REFUSED REFUSED
 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
 12 / 13 / 2013
Transaction ID : SA11AI.136623
 Amount of Each Receipt this Period
 200.00

B. MR DREW TACHELLA 070
 Full Name (Last, First, Middle Initial)
 Mailing Address 1002 US HIGHWAY 9 N
 City State Zip Code
 WOODBRIDGE NJ 07095
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 REFUSED REFUSED
 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
 12 / 20 / 2013
Transaction ID : SA11AI.136621
 Amount of Each Receipt this Period
 100.00

C. MS JEANETTE V TALBOTT 275
 Full Name (Last, First, Middle Initial)
 Mailing Address 134 S FLDS CIR
 City State Zip Code
 CHAPEL HILL NC 27516
 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 / 18 / 2013
Transaction ID : SA11AI.136668
 Amount of Each Receipt this Period
 75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00
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 620 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS JEANETTE V TALBOTT 275
 Full Name (Last, First, Middle Initial)
 Mailing Address 134 S FLDS CIR
 City State Zip Code
 CHAPEL HILL NC 27516
 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
 12 / 18 / 2013
Transaction ID : SA11AI.136669
 Amount of Each Receipt this Period
 75.00

B. MR CHARLES R TALEN 705
 Full Name (Last, First, Middle Initial)
 Mailing Address 1216 POM ROY RD
 City State Zip Code
 LAKE ARTHUR LA 70549
 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 ▼
 700.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : SA11AI.136679
 Amount of Each Receipt this Period
 500.00

C. Raymond Talen 705
 Full Name (Last, First, Middle Initial)
 Mailing Address 1216 POM ROY RD
 City State Zip Code
 Lake Arthur LA 70549
 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 / D D / Y Y Y Y Y
 10 / 22 / 2013
Transaction ID : SA11AI.147209
 Amount of Each Receipt this Period
 500.00

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: PAGE 621 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS BRENDA L TATMAN 805
 Full Name (Last, First, Middle Initial)
 Mailing Address 7101 SILVERMOON LN
 City State Zip Code
 FORT COLLINS CO 80525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 REFUSED REFUSED
 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 / 24 / 2013
Transaction ID : SA11Al.136804
 Amount of Each Receipt this Period
 100.00

B. MS BRENDA L TATMAN 805
 Full Name (Last, First, Middle Initial)
 Mailing Address 7101 SILVERMOON LN
 City State Zip Code
 FORT COLLINS CO 80525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 REFUSED REFUSED
 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
 12 / 19 / 2013
Transaction ID : SA11Al.136803
 Amount of Each Receipt this Period
 100.00

C. MS BRENDA L TATMAN 805
 Full Name (Last, First, Middle Initial)
 Mailing Address 7101 SILVERMOON LN
 City State Zip Code
 FORT COLLINS CO 80525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 REFUSED REFUSED
 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
 12 / 24 / 2013
Transaction ID : SA11Al.136802
 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 622 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. COL DANIEL D TAYLOR 853
Full Name (Last, First, Middle Initial)

Mailing Address 4732 N BROOKVIEW TER

City LITCHFIELD PARK State AZ Zip Code 85340

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

Name of Employer US MILITARY Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **675.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 08 / 2013

Transaction ID : SA11AI.136886

Amount of Each Receipt this Period
125.00

B. COL DANIEL D TAYLOR 853
Full Name (Last, First, Middle Initial)

Mailing Address 4732 N BROOKVIEW TER

City LITCHFIELD PARK State AZ Zip Code 85340

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

Name of Employer US MILITARY Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **825.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 10 / 2013

Transaction ID : SA11AI.136889

Amount of Each Receipt this Period
150.00

C. COL DANIEL D TAYLOR 853
Full Name (Last, First, Middle Initial)

Mailing Address 4732 N BROOKVIEW TER

City LITCHFIELD PARK State AZ Zip Code 85340

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

Name of Employer US MILITARY Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **925.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 28 / 2013

Transaction ID : SA11AI.136887

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶	375.00
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 623 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. COL DANIEL D TAYLOR 853
 Full Name (Last, First, Middle Initial)
 Mailing Address 4732 N BROOKVIEW TER
 City LITCHFIELD PARK State AZ Zip Code 85340
 FEC ID number of contributing federal political committee. **C**
 Name of Employer US MILITARY Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1025.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2013
Transaction ID : SA11AI.136888
 Amount of Each Receipt this Period
 100.00

B. MR JOHN T TENETY 100 SR
 Full Name (Last, First, Middle Initial)
 Mailing Address 30 W 63RD ST APT 25H
 City NEW YORK State NY Zip Code 10023
 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 / 2013
Transaction ID : SA11AI.136965
 Amount of Each Receipt this Period
 75.00

C. MR JOHN T TENETY 100 SR
 Full Name (Last, First, Middle Initial)
 Mailing Address 30 W 63RD ST APT 25H
 City NEW YORK State NY Zip Code 10023
 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
 12 / 11 / 2013
Transaction ID : SA11AI.136966
 Amount of Each Receipt this Period
 75.00

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 624 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS JUDITH A TENKLEY 986			Date of Receipt M M / D D / Y Y Y Y Y 08 / 06 / 2013 Transaction ID : SA11Al.136970
Mailing Address 17200 NE 40TH ST			Amount of Each Receipt this Period 50.00
City VANCOUVER	State WA	Zip Code 98682	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 300.00	
Name of Employer NONE		Occupation HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MS JUDITH A TENKLEY 986			Date of Receipt M M / D D / Y Y Y Y Y 08 / 21 / 2013 Transaction ID : SA11Al.136969
Mailing Address 17200 NE 40TH ST			Amount of Each Receipt this Period 50.00
City VANCOUVER	State WA	Zip Code 98682	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 350.00	
Name of Employer NONE		Occupation HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. MS JUDITH A TENKLEY 986			Date of Receipt M M / D D / Y Y Y Y Y 10 / 07 / 2013 Transaction ID : SA11Al.136971
Mailing Address 17200 NE 40TH ST			Amount of Each Receipt this Period 100.00
City VANCOUVER	State WA	Zip Code 98682	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 450.00	
Name of Employer NONE		Occupation HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

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 625 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR WILLIAM A TERHUNE 980
 Full Name (Last, First, Middle Initial)
 Mailing Address 15925 E SHORE DR
 City LYNWOOD State WA Zip Code 98087
 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 / 27 / 2013
Transaction ID : SA11AI.136993
 Amount of Each Receipt this Period
 100.00

B. MR CONWAY THEET 852
 Full Name (Last, First, Middle Initial)
 Mailing Address 2428 E CAMINO ST
 City MESA State AZ Zip Code 85213
 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 / 29 / 2013
Transaction ID : SA11AI.137097
 Amount of Each Receipt this Period
 100.00

C. MS JENNEFER J THOMAS 210
 Full Name (Last, First, Middle Initial)
 Mailing Address 1912 EASTRIDGE RD
 City LUTHERVILLE TIMONI State MD Zip Code 21093
 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
 10 / 28 / 2013
Transaction ID : SA11AI.137188
 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 626 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS JENNEFER J THOMAS 210		Date of Receipt
Mailing Address 1912 EASTRIDGE RD		<input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2013"/>
City	State	Zip Code
LUTHERVILLE TIMONI	MD	21093
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.137187
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<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="325.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MS JOAN D THOMAS 381		Date of Receipt
Mailing Address 4366 W CHERRY PLACE DR		<input type="text" value="12"/> / <input type="text" value="26"/> / <input type="text" value="2013"/>
City	State	Zip Code
MEMPHIS	TN	38117
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.137221
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="175.00"/>
Name of Employer	Occupation	
UNIVERSITY OF MEMPHIS	FACULTY	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="275.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MR ROBERT W THOMAS 974		Date of Receipt
Mailing Address 494 W 10TH AVE APT 313		<input type="text" value="07"/> / <input type="text" value="03"/> / <input type="text" value="2013"/>
City	State	Zip Code
EUGENE	OR	97401
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.137283
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="150.00"/>
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) ▼		

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=""/>

**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 627 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR FRED T THOMASSON 287
 Full Name (Last, First, Middle Initial)
 Mailing Address 82 APPIAN WAY
 City ARDEN State NC Zip Code 28704
 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 ▼ 825.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2013
Transaction ID : SA11AI.137294
 Amount of Each Receipt this Period
 225.00

B. MR FRED T THOMASSON 287
 Full Name (Last, First, Middle Initial)
 Mailing Address 82 APPIAN WAY
 City ARDEN State NC Zip Code 28704
 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 ▼ 1050.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2013
Transaction ID : SA11AI.137293
 Amount of Each Receipt this Period
 225.00

C. MRS PAGE G THOMPSON 231
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 7
 City MECHANICSVILLE State VA Zip Code 23111
 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
 08 / 21 / 2013
Transaction ID : SA11AI.137317
 Amount of Each Receipt this Period
 75.00

SUBTOTAL of Receipts This Page (optional).....▶	525.00
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 628 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MRS PAGE G THOMPSON 231
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 7
 City MECHANICSVILLE State VA Zip Code 23111
 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
 11 / 21 / 2013
Transaction ID : SA11AI.137316
 Amount of Each Receipt this Period
 75.00

B. MR CHARLES K THOMPSON 258
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 477
 City CRAB ORCHARD State WV Zip Code 25827
 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
 09 / 24 / 2013
Transaction ID : SA11AI.137320
 Amount of Each Receipt this Period
 100.00

C. MR CHARLES K THOMPSON 258
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 477
 City CRAB ORCHARD State WV Zip Code 25827
 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
 12 / 24 / 2013
Transaction ID : SA11AI.137321
 Amount of Each Receipt this Period
 100.00

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 629 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MISS BEVERLY THOMPSON 317
 Full Name (Last, First, Middle Initial)
 Mailing Address 3005 EMBER CT
 City ALBANY State GA Zip Code 31721
 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
 11 / 22 / 2013
Transaction ID : SA11Al.137338
 Amount of Each Receipt this Period
 50.00

B. MR TONY THOMPSON 365
 Full Name (Last, First, Middle Initial)
 Mailing Address 28630 JOSEPHINE DR
 City ELBERTA State AL Zip Code 36530
 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
 08 / 09 / 2013
Transaction ID : SA11Al.137355
 Amount of Each Receipt this Period
 150.00

C. MR TONY THOMPSON 365
 Full Name (Last, First, Middle Initial)
 Mailing Address 28630 JOSEPHINE DR
 City ELBERTA State AL Zip Code 36530
 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
 11 / 08 / 2013
Transaction ID : SA11Al.137354
 Amount of Each Receipt this Period
 150.00

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: PAGE 630 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS PATRICIA R THOMPSON 761
 Full Name (Last, First, Middle Initial)
 Mailing Address 4424 FRENCH LAKE DR
 City State Zip Code
 FORT WORTH TX 76133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE HOMEMAKER
 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 / 30 / 2013
Transaction ID : SA11AI.137395
 Amount of Each Receipt this Period
 100.00

B. MS PATRICIA R THOMPSON 761
 Full Name (Last, First, Middle Initial)
 Mailing Address 4424 FRENCH LAKE DR
 City State Zip Code
 FORT WORTH TX 76133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE HOMEMAKER
 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
 10 / 30 / 2013
Transaction ID : SA11AI.137396
 Amount of Each Receipt this Period
 100.00

C. MR JOHN L THOMPSON 773
 Full Name (Last, First, Middle Initial)
 Mailing Address 11159 WILLIS WAUKEGAN RD
 City State Zip Code
 CONROE TX 77303
 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
 12 / 12 / 2013
Transaction ID : SA11AI.137401
 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 631 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS NORMA B THORNBROUGH 871		Date of Receipt
Mailing Address 13208 HIDDEN VALLEY RD NE		<input type="text" value="08"/> / <input type="text" value="26"/> / <input type="text" value="2013"/>
City	State	Zip Code
ALBUQUERQUE	NM	87111
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.137470
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="325.00"/>	

Full Name (Last, First, Middle Initial) B. MS NORMA B THORNBROUGH 871		Date of Receipt
Mailing Address 13208 HIDDEN VALLEY RD NE		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2013"/>
City	State	Zip Code
ALBUQUERQUE	NM	87111
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.137473
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="425.00"/>	

Full Name (Last, First, Middle Initial) C. MS NORMA B THORNBROUGH 871		Date of Receipt
Mailing Address 13208 HIDDEN VALLEY RD NE		<input type="text" value="12"/> / <input type="text" value="16"/> / <input type="text" value="2013"/>
City	State	Zip Code
ALBUQUERQUE	NM	87111
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.137471
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="325.00"/>	

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 632 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS NORMA B THORNBROUGH 871
 Full Name (Last, First, Middle Initial)
 Mailing Address 13208 HIDDEN VALLEY RD NE
 City ALBUQUERQUE State NM Zip Code 87111
 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
 12 / 17 / 2013
Transaction ID : SA11Al.137472
 Amount of Each Receipt this Period
 100.00

B. MS CHARLOTTE R THURSTON 370
 Full Name (Last, First, Middle Initial)
 Mailing Address 185 ROCK SPRINGS RD
 City CASTALIAN SPRINGS State TN Zip Code 37031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 24 / 2013
Transaction ID : SA11Al.137528
 Amount of Each Receipt this Period
 100.00

C. MS CHARLOTTE R THURSTON 370
 Full Name (Last, First, Middle Initial)
 Mailing Address 185 ROCK SPRINGS RD
 City CASTALIAN SPRINGS State TN Zip Code 37031
 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 24 / 2013
Transaction ID : SA11Al.137527
 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 633 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

A. MR EARL TIEMAN 544
 Full Name (Last, First, Middle Initial)
 Mailing Address 10705 STADT RD
 City MARSHFIELD State WI Zip Code 54449
 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 / 2013
Transaction ID : SA11AI.137559
 Amount of Each Receipt this Period
 50.00

B. MR GERALD TIERNEY 152
 Full Name (Last, First, Middle Initial)
 Mailing Address 127 MAIN ENTRANCE DR
 City PITTSBURGH State PA Zip Code 15228
 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
 11 / 20 / 2013
Transaction ID : SA11AI.137562
 Amount of Each Receipt this Period
 100.00

C. MS NANCY P TIMMER 786
 Full Name (Last, First, Middle Initial)
 Mailing Address 249 SUNDAY CIR
 City FREDERICKSBRG State TX Zip Code 78624
 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 ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2013
Transaction ID : SA11AI.137602
 Amount of Each Receipt this Period
 100.00

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 634 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS NANCY P TIMMER 786		Date of Receipt
Mailing Address 249 SUNDAY CIR		<input type="text" value="10"/> / <input type="text" value="07"/> / <input type="text" value="2013"/>
City	State	Zip Code
FREDERICKSBURG	TX	78624
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : SA11AI.137603
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="340.00"/>	<input type="text" value="120.00"/>

Full Name (Last, First, Middle Initial) B. MR JAN TIMMERMANS 454		Date of Receipt
Mailing Address 478 RUE MARSEILLE		<input type="text" value="07"/> / <input type="text" value="18"/> / <input type="text" value="2013"/>
City	State	Zip Code
DAYTON	OH	45429
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : SA11AI.137614
BELOGIO INC	MANAGER	
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="225.00"/>	<input type="text" value="225.00"/>

Full Name (Last, First, Middle Initial) C. MS MAXINE C TIPSWORD 658		Date of Receipt
Mailing Address 4622 S JACKSON AVE		<input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2013"/>
City	State	Zip Code
SPRINGFIELD	MO	65804
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : SA11AI.137638
NONE	HOUSEWIFE	
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="210.00"/>	<input type="text" value="75.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="420.00"/>
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 635 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS LOIS M TOEDTER 554
 Full Name (Last, First, Middle Initial)
 Mailing Address 9901 PENN AVE S
 APT 317
 City MINNEAPOLIS State MN Zip Code 55431
 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
 07 / 30 / 2013
Transaction ID : SA11AI.137712
 Amount of Each Receipt this Period
 50.00

B. MS ESTHER J TOEWS 951
 Full Name (Last, First, Middle Initial)
 Mailing Address 1175 RAVENSCOURT AVE
 City SAN JOSE State CA Zip Code 95128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 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
 10 / 14 / 2013
Transaction ID : SA11AI.137720
 Amount of Each Receipt this Period
 30.00

C. MS ESTHER J TOEWS 951
 Full Name (Last, First, Middle Initial)
 Mailing Address 1175 RAVENSCOURT AVE
 City SAN JOSE State CA Zip Code 95128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 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
 12 / 03 / 2013
Transaction ID : SA11AI.137722
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	105.00
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 636 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR RICHARD TOWNER 627
 Full Name (Last, First, Middle Initial)
 Mailing Address 3052 LOUISE LN
 City SPRINGFIELD State IL Zip Code 62702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 13 / 2013
Transaction ID : SA11AI.137859
 Amount of Each Receipt this Period
 175.00

B. MS GLENDORA TRESCHER 752
 Full Name (Last, First, Middle Initial)
 Mailing Address 8523 THACKERY ST APT 6008
 City DALLAS State TX Zip Code 75225
 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
 09 / 03 / 2013
Transaction ID : SA11AI.137965
 Amount of Each Receipt this Period
 200.00

C. MS PATRICIA D TRUSSELL 405
 Full Name (Last, First, Middle Initial)
 Mailing Address 111 WOODLAND AVE APT 409
 City LEXINGTON State KY Zip Code 40502
 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 ▼
 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 19 / 2013
Transaction ID : SA11AI.138097
 Amount of Each Receipt this Period
 175.00

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 637 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR CECIL TURNER 727		Date of Receipt
Mailing Address 36 DEDDINGTON DR		<input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2013"/>
City	State	Zip Code
BELLA VISTA	AR	72714
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.138228
Name of Employer	Occupation	Amount of Each Receipt this Period
RESTAURANT	SELF EMPLOYED	<input type="text" value="150.00"/>
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"/>	

Full Name (Last, First, Middle Initial) B. MR CECIL TURNER 727		Date of Receipt
Mailing Address 36 DEDDINGTON DR		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2013"/>
City	State	Zip Code
BELLA VISTA	AR	72714
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.138227
Name of Employer	Occupation	Amount of Each Receipt this Period
RESTAURANT	SELF EMPLOYED	<input type="text" value="35.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="385.00"/>	

Full Name (Last, First, Middle Initial) C. MRS MARGARET TURNQUIST 840		Date of Receipt
Mailing Address 353 E KITTRIDGE ST		<input type="text" value="08"/> / <input type="text" value="05"/> / <input type="text" value="2013"/>
City	State	Zip Code
MIDVALE	UT	84047
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.138246
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	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="275.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="260.00"/>
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 638 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR JON TYLER 853
 Full Name (Last, First, Middle Initial)
 Mailing Address 10653 S HANSLEY BLV
 City YUMA State AZ Zip Code 85367
 FEC ID number of contributing federal political committee. **C**
 Name of Employer POLYESTER CO 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
 10 / 17 / 2013
Transaction ID : SA11AI.138298
 Amount of Each Receipt this Period
 75.00

B. MS VON M ULLMAN 577
 Full Name (Last, First, Middle Initial)
 Mailing Address 12944 199TH ST
 City VALE State SD Zip Code 57788
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation FARMER
 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
 11 / 15 / 2013
Transaction ID : SA11AI.138333
 Amount of Each Receipt this Period
 150.00

C. MR WILLIAM J UMPHLETT 234
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 597
 City WINDSOR State VA Zip Code 23487
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NORTHRUP GRUMMAN Occupation MAINTENANCE
 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 / 06 / 2013
Transaction ID : SA11AI.138361
 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 639 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS GEORGIA C UPTON 720
 Full Name (Last, First, Middle Initial)
 Mailing Address 56 PUCKETT LANE
 City ENOLA State AR Zip Code 72047
 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 / 26 / 2013
Transaction ID : SA11Al.138394
 Amount of Each Receipt this Period
 100.00

B. MS GEORGIA C UPTON 720
 Full Name (Last, First, Middle Initial)
 Mailing Address 56 PUCKETT LANE
 City ENOLA State AR Zip Code 72047
 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
 10 / 28 / 2013
Transaction ID : SA11Al.138393
 Amount of Each Receipt this Period
 100.00

C. MS LUANNA URIE 657
 Full Name (Last, First, Middle Initial)
 Mailing Address 23455 GREEN SHORES DR
 City SHELL KNOB State MO Zip Code 65747
 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
 12 / 03 / 2013
Transaction ID : SA11Al.138405
 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 640 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS WANDA Y URSINO 980
 Full Name (Last, First, Middle Initial)
 Mailing Address 21060 142ND AVE SE
 City KENT State WA Zip Code 98042
 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 / 27 / 2013
Transaction ID : SA11Al.138415
 Amount of Each Receipt this Period
 100.00

B. MS WANDA Y URSINO 980
 Full Name (Last, First, Middle Initial)
 Mailing Address 21060 142ND AVE SE
 City KENT State WA Zip Code 98042
 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
 11 / 27 / 2013
Transaction ID : SA11Al.138416
 Amount of Each Receipt this Period
 100.00

C. MS MELITTA VAHALIK 779
 Full Name (Last, First, Middle Initial)
 Mailing Address 620 COUNTY ROAD 328
 City YOAKUM State TX Zip Code 77995
 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 ▼ 340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 21 / 2013
Transaction ID : SA11Al.138456
 Amount of Each Receipt this Period
 150.00

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:	PAGE 641 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

A. MS MELITTA VAHALIK 779
 Full Name (Last, First, Middle Initial)
 Mailing Address 620 COUNTY ROAD 328
 City YOAKUM State TX Zip Code 77995
 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 ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2013
Transaction ID : SA11Al.138457
 Amount of Each Receipt this Period
 20.00

B. MR CLINTON VAN ANTWERP 974
 Full Name (Last, First, Middle Initial)
 Mailing Address 1115 E CHADWICK AVE
 City COTTAGE GROVE State OR Zip Code 97424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer JANITORIAL SERVICES Occupation BUSINESS OWNER
 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 / 2013
Transaction ID : SA11Al.138512
 Amount of Each Receipt this Period
 75.00

C. MR CLINTON VAN ANTWERP 974
 Full Name (Last, First, Middle Initial)
 Mailing Address 1115 E CHADWICK AVE
 City COTTAGE GROVE State OR Zip Code 97424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer JANITORIAL SERVICES Occupation BUSINESS OWNER
 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 / 2013
Transaction ID : SA11Al.138513
 Amount of Each Receipt this Period
 75.00

SUBTOTAL of Receipts This Page (optional).....▶	170.00
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 642 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS DORINDA VAN BURKLEO 785		Date of Receipt
Mailing Address 1400 W IRIS AVE		<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2013"/>
City	State	Zip Code
MCALLEN	TX	78501
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.138519
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	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="225.00"/>	

Full Name (Last, First, Middle Initial) B. MS JAN B VANDENBERG 977		Date of Receipt
Mailing Address 61951 KILDONAN CT		<input type="text" value="08"/> / <input type="text" value="26"/> / <input type="text" value="2013"/>
City	State	Zip Code
BEND	OR	97702
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.138624
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<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) C. MS JAN B VANDENBERG 977		Date of Receipt
Mailing Address 61951 KILDONAN CT		<input type="text" value="10"/> / <input type="text" value="01"/> / <input type="text" value="2013"/>
City	State	Zip Code
BEND	OR	97702
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.138622
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="400.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="475.00"/>
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 643 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS JAN B VANDENBERG 977		Date of Receipt
Mailing Address 61951 KILDONAN CT		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2013"/>
City	State	Zip Code
BEND	OR	97702
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.138623
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<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="600.00"/>	

Full Name (Last, First, Middle Initial) B. MS REBECCA R VANDERPOOL 665		Date of Receipt
Mailing Address 9816 FAIRWAY DR		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2013"/>
City	State	Zip Code
MERIDEN	KS	66512
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.138643
Name of Employer	Occupation	Amount of Each Receipt this Period
VILLAGE GREENS INC	REAL ESTATE	<input type="text" value="175.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="375.00"/>	

Full Name (Last, First, Middle Initial) C. MS DANA J VANES 463		Date of Receipt
Mailing Address 35 VICTORIA CIR		<input type="text" value="07"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>
City	State	Zip Code
LA PORTE	IN	46350
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.138669
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="70.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="230.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="445.00"/>
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 644 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS CHARLOTTE E VANHOOK 600
 Full Name (Last, First, Middle Initial)
 Mailing Address 292 HANLON RD
 City LIBERTYVILLE State IL Zip Code 60048
 Date of Receipt: 12 / 16 / 2013
Transaction ID : SA11Al.138678
 Amount of Each Receipt this Period: 150.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: PRIPZKER AND PRIPZKER Occupation: OFFICE STAFF
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date: 250.00

B. MS VERONICA VANKEULEN 562
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E 2ND ST
 City MINNEOTA State MN Zip Code 56264
 Date of Receipt: 11 / 27 / 2013
Transaction ID : SA11Al.138685
 Amount of Each Receipt this Period: 50.00
 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

C. MR CARL VARNER 430
 Full Name (Last, First, Middle Initial)
 Mailing Address 8010 HONDA HILLS RD
 City THORNVILLE State OH Zip Code 43076
 Date of Receipt: 09 / 06 / 2013
Transaction ID : SA11Al.138742
 Amount of Each Receipt this Period: 35.00
 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

SUBTOTAL of Receipts This Page (optional)..... ▶ 235.00
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 645 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS ANNAMAE R VATUONE 950
 Full Name (Last, First, Middle Initial)
 Mailing Address 5885A MONTEREY FRONTAGE RD
 City State Zip Code
 GILROY CA 95020
 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 ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 15 / 2013
Transaction ID : SA11Al.138756
 Amount of Each Receipt this Period
 100.00

B. MR WILLIAM VEAZEY 731
 Full Name (Last, First, Middle Initial)
 Mailing Address 2108 NW 61ST 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 ▼
 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 08 / 2013
Transaction ID : SA11Al.138794
 Amount of Each Receipt this Period
 50.00

C. MS SUZANNA VELDHUIS 559
 Full Name (Last, First, Middle Initial)
 Mailing Address 1188 MEADOWLARK CT SW
 City State Zip Code
 ROCHESTER MN 55902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE NOT EMPLOYED
 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 / 30 / 2013
Transaction ID : SA11Al.138815
 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 646 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS SUZANNA VELDHUIS 559
 Full Name (Last, First, Middle Initial)
 Mailing Address 1188 MEADOWLARK CT SW
 City ROCHESTER State MN Zip Code 55902
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2013
Transaction ID : SA11AI.138814
 Amount of Each Receipt this Period
 50.00

B. MS SUZANNA VELDHUIS 559
 Full Name (Last, First, Middle Initial)
 Mailing Address 1188 MEADOWLARK CT SW
 City ROCHESTER State MN Zip Code 55902
 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 ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 19 / 2013
Transaction ID : SA11AI.138811
 Amount of Each Receipt this Period
 100.00

C. MS BETH I VERCLER 615
 Full Name (Last, First, Middle Initial)
 Mailing Address 112 BROOKWOOD CT
 City WASHINGTON State IL Zip Code 61571
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 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
 08 / 19 / 2013
Transaction ID : SA11AI.138839
 Amount of Each Receipt this Period
 100.00

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 647 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS SANDRA L VEROLA 120
 Full Name (Last, First, Middle Initial)
 Mailing Address 31 REDWOOD DR
 City BALLSTON LAKE State NY Zip Code 12019
 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 / 05 / 2013
Transaction ID : SA11Al.138866
 Amount of Each Receipt this Period
 150.00

B. MS SANDRA L VEROLA 120
 Full Name (Last, First, Middle Initial)
 Mailing Address 31 REDWOOD DR
 City BALLSTON LAKE State NY Zip Code 12019
 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
 10 / 07 / 2013
Transaction ID : SA11Al.138867
 Amount of Each Receipt this Period
 150.00

C. MR WILLIAM R VESTAL 462
 Full Name (Last, First, Middle Initial)
 Mailing Address 10826 TOURNAMENT LN
 City INDIANAPOLIS State IN Zip Code 46229
 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
 10 / 14 / 2013
Transaction ID : SA11Al.138877
 Amount of Each Receipt this Period
 50.00

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 648 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR WILLIAM R VESTAL 462
 Full Name (Last, First, Middle Initial)
 Mailing Address 10826 TOURNAMENT LN
 City INDIANAPOLIS State IN Zip Code 46229
 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
 11 / 21 / 2013
Transaction ID : SA11AI.138878
 Amount of Each Receipt this Period
 50.00

B. MS NORA L VOCE 217
 Full Name (Last, First, Middle Initial)
 Mailing Address 3470 EMYS PL
 City MONROVIA State MD Zip Code 21770
 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 ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2013
Transaction ID : SA11AI.139022
 Amount of Each Receipt this Period
 50.00

C. MRS MILDRED R VOGT 671
 Full Name (Last, First, Middle Initial)
 Mailing Address 3001 IVY DR
 APT 106
 City NORTH NEWTON State KS Zip Code 67117
 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
 07 / 29 / 2013
Transaction ID : SA11AI.139041
 Amount of Each Receipt this Period
 125.00

SUBTOTAL of Receipts This Page (optional).....▶	225.00
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 649 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MRS MILDRED R VOGT 671		Date of Receipt
Mailing Address 3001 IVY DR APT 106		<input type="text" value="09"/> / <input type="text" value="04"/> / <input type="text" value="2013"/>
City	State	Zip Code
NORTH NEWTON	KS	67117
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.139044
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="290.00"/>	

Full Name (Last, First, Middle Initial) B. MRS MILDRED R VOGT 671		Date of Receipt
Mailing Address 3001 IVY DR APT 106		<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2013"/>
City	State	Zip Code
NORTH NEWTON	KS	67117
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.139043
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<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="415.00"/>	

Full Name (Last, First, Middle Initial) C. MRS MILDRED R VOGT 671		Date of Receipt
Mailing Address 3001 IVY DR APT 106		<input type="text" value="12"/> / <input type="text" value="10"/> / <input type="text" value="2013"/>
City	State	Zip Code
NORTH NEWTON	KS	67117
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.139042
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="465.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="200.00"/>
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 650 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS DEBRA VON HOLTEN 626		Date of Receipt
Mailing Address PO BOX 485		<input type="text" value="08"/> / <input type="text" value="14"/> / <input type="text" value="2013"/>
City	State	Transaction ID : SA11Al.139070
WILLIAMSVILLE	IL	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="475.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MS DEBRA VON HOLTEN 626		Date of Receipt
Mailing Address PO BOX 485		<input type="text" value="09"/> / <input type="text" value="16"/> / <input type="text" value="2013"/>
City	State	Transaction ID : SA11Al.139072
WILLIAMSVILLE	IL	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	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="675.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MS DEBRA VON HOLTEN 626		Date of Receipt
Mailing Address PO BOX 485		<input type="text" value="12"/> / <input type="text" value="16"/> / <input type="text" value="2013"/>
City	State	Transaction ID : SA11Al.139071
WILLIAMSVILLE	IL	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="750.00"/>	
<input type="checkbox"/> Other (specify) ▼		

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: (check only one)	PAGE 651 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS ELEANOR B WADE 863
 Full Name (Last, First, Middle Initial)
 Mailing Address 201 E MINGUS AVE
 APT 305
 City COTTONWOOD State AZ Zip Code 86326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2013
Transaction ID : SA11AI.139160
 Amount of Each Receipt this Period
 75.00

B. MR JOHN WADSWORTH 890
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 256
 City PANACA State NV Zip Code 89042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 20 / 2013
Transaction ID : SA11AI.139173
 Amount of Each Receipt this Period
 100.00

C. MR JOHN WADSWORTH 890
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 256
 City PANACA State NV Zip Code 89042
 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 ▼ 295.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2013
Transaction ID : SA11AI.139174
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	195.00
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 652 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR DAVID M WAGNER 109
 Full Name (Last, First, Middle Initial)
 Mailing Address 130 N MAIN ST
 STE 202
 City NEW CITY State NY Zip Code 10956
 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 ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 15 / 2013
Transaction ID : SA11AI.139201
 Amount of Each Receipt this Period
 225.00

B. MR DAVID M WAGNER 109
 Full Name (Last, First, Middle Initial)
 Mailing Address 130 N MAIN ST
 STE 202
 City NEW CITY State NY Zip Code 10956
 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 ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 14 / 2013
Transaction ID : SA11AI.139200
 Amount of Each Receipt this Period
 200.00

C. MS TERESA M WAIGHT 779
 Full Name (Last, First, Middle Initial)
 Mailing Address 2171 FM 532 W
 City SHINER State TX Zip Code 77984
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TERESA ANIMALS TRAINING Occupation SELF EMPLOYED
 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
 11 / 25 / 2013
Transaction ID : SA11AI.139254
 Amount of Each Receipt this Period
 175.00

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: (check only one)	PAGE 653 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS SHARON WAINWRIGHT 320
 Full Name (Last, First, Middle Initial)
 Mailing Address 6606 BROOKRIDGE CT
 City STARKE State FL Zip Code 32091
 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 / 03 / 2013
Transaction ID : SA11AI.139257
 Amount of Each Receipt this Period
 100.00

B. MS JOANNA WAITE 177
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 52
 City JERSEY SHORE State PA Zip Code 17740
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2013
Transaction ID : SA11AI.139263
 Amount of Each Receipt this Period
 75.00

C. MS JOANNA WAITE 177
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 52
 City JERSEY SHORE State PA Zip Code 17740
 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 ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2013
Transaction ID : SA11AI.139266
 Amount of Each Receipt this Period
 75.00

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 654 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS JOANNA WAITE 177
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 52
 City JERSEY SHORE State PA Zip Code 17740
 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 ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2013
Transaction ID : SA11AI.139267
 Amount of Each Receipt this Period
 50.00

B. MS JOANNA WAITE 177
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 52
 City JERSEY SHORE State PA Zip Code 17740
 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 ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2013
Transaction ID : SA11AI.139264
 Amount of Each Receipt this Period
 50.00

C. MS JOANNA WAITE 177
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 52
 City JERSEY SHORE State PA Zip Code 17740
 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 ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2013
Transaction ID : SA11AI.139268
 Amount of Each Receipt this Period
 75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
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 655 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS JOANNA WAITE 177
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 52
 City JERSEY SHORE State PA Zip Code 17740
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2013
Transaction ID : SA11AI.139265
 Amount of Each Receipt this Period
 500.00

B. MS WILLOE M WALDROOP 736
 Full Name (Last, First, Middle Initial)
 Mailing Address 432 S 23RD PL
 City CLINTON State OK Zip Code 73601
 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 ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 30 / 2013
Transaction ID : SA11AI.139332
 Amount of Each Receipt this Period
 500.00

C. MS WILLOE M WALDROOP 736
 Full Name (Last, First, Middle Initial)
 Mailing Address 432 S 23RD PL
 City CLINTON State OK Zip Code 73601
 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 ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2013
Transaction ID : SA11AI.139331
 Amount of Each Receipt this Period
 350.00

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 656 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

A. MR NORMAN N WALKER 358
 Full Name (Last, First, Middle Initial)
 Mailing Address 2219 BRIARCLIFF RD SE
 City HUNTSVILLE State AL Zip Code 35801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation NONE
 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 / 03 / 2013
Transaction ID : SA11Al.139370
 Amount of Each Receipt this Period
 300.00

B. MR ROBERT H WALKER 370
 Full Name (Last, First, Middle Initial)
 Mailing Address 411 FOREST ST
 City LEWISBURG State TN Zip Code 37091
 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
 10 / 03 / 2013
Transaction ID : SA11Al.139374
 Amount of Each Receipt this Period
 150.00

C. MR DAVID WALKER 836
 Full Name (Last, First, Middle Initial)
 Mailing Address 3615 CASSIA RD
 City NEW PLYMOUTH State ID Zip Code 83655
 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 / 09 / 2013
Transaction ID : SA11Al.139421
 Amount of Each Receipt this Period
 150.00

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: (check only one)	PAGE 657 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MRS DARLENE WALL 320		Date of Receipt
Mailing Address 823 ANA CT		<input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2013"/>
City	State	Transaction ID : SA11Al.139439
SAINT AUGUSTINE	FL	Amount of Each Receipt this Period
	Zip Code 32086	<input type="text" value="500.00"/>
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="600.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MR GEORGE B WALL 522		Date of Receipt
Mailing Address 26357 212TH AVE		<input type="text" value="11"/> / <input type="text" value="18"/> / <input type="text" value="2013"/>
City	State	Transaction ID : SA11Al.139442
DELHI	IA	Amount of Each Receipt this Period
	Zip Code 52223	<input type="text" value="100.00"/>
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
NONE	SELF EMPLOYED	
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. MRS MARILYN J WALLACE 828		Date of Receipt
Mailing Address 22 LONGHORN DR		<input type="text" value="10"/> / <input type="text" value="01"/> / <input type="text" value="2013"/>
City	State	Transaction ID : SA11Al.139489
BUFFALO	WY	Amount of Each Receipt this Period
	Zip Code 82834	<input type="text" value="25.00"/>
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="205.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="625.00"/>
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 658 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MRS MARILYN J WALLACE 828			Date of Receipt
Mailing Address 22 LONGHORN DR			<input type="text" value="12"/> / <input type="text" value="04"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11AI.139492
BUFFALO	WY	82834	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="230.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MR HARRY WALSTRA 463			Date of Receipt
Mailing Address 329 8TH PL SE			<input type="text" value="07"/> / <input type="text" value="24"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11AI.139545
DEMOTTE	IN	46310	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="225.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. MR JOHN E WALZ 959			Date of Receipt
Mailing Address PO BOX 430			<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11AI.147475
MARYSVILLE	CA	95901	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="250.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="225.00"/>
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 659 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS DOROTHY L WARD 444
 Full Name (Last, First, Middle Initial)
 Mailing Address 29706 CAMPBELL RD
 City HANOVERTON State OH Zip Code 44423
 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
 11 / 14 / 2013
Transaction ID : SA11AI.139660
 Amount of Each Receipt this Period
 25.00

B. MS DOROTHY L WARD 444
 Full Name (Last, First, Middle Initial)
 Mailing Address 29706 CAMPBELL RD
 City HANOVERTON State OH Zip Code 44423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 24 / 2013
Transaction ID : SA11AI.139659
 Amount of Each Receipt this Period
 50.00

C. MR CHARLES M WARE 456
 Full Name (Last, First, Middle Initial)
 Mailing Address 366 FAIRWAY AVE
 City CHILLICOTHE State OH Zip Code 45601
 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 10 / 2013
Transaction ID : SA11AI.139706
 Amount of Each Receipt this Period
 200.00

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 660 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS MARY WARNEMUNDE 452
 Full Name (Last, First, Middle Initial)
 Mailing Address 3622 S HOPPER RIDGE RD
 City CINCINNATI State OH Zip Code 45255
 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 / 16 / 2013
Transaction ID : SA11AI.139729
 Amount of Each Receipt this Period
 150.00

B. MS CHRISTY A WATENPAUGH 760
 Full Name (Last, First, Middle Initial)
 Mailing Address 1734 N DOOLEY ST
 City GRAPEVINE State TX Zip Code 76051
 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
 12 / 23 / 2013
Transaction ID : SA11AI.139816
 Amount of Each Receipt this Period
 50.00

C. MS JULIETTE WATKOSKI 495
 Full Name (Last, First, Middle Initial)
 Mailing Address 1125 COVELL AVE NW
 City GRAND RAPIDS State MI Zip Code 49504
 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
 07 / 15 / 2013
Transaction ID : SA11AI.139863
 Amount of Each Receipt this Period
 75.00

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 661 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR ORENE M WATSON 921
 Full Name (Last, First, Middle Initial)
 Mailing Address 6368 LAKE COMO AVE
 City SAN DIEGO State CA Zip Code 92119
 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
 11 / 25 / 2013
Transaction ID : SA11AI.139907
 Amount of Each Receipt this Period
 250.00

B. MR JERRY J WATTON 516
 Full Name (Last, First, Middle Initial)
 Mailing Address 2106 BLUFF ST
 City HAMBURG State IA Zip Code 51640
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 06 / 2013
Transaction ID : SA11AI.139929
 Amount of Each Receipt this Period
 75.00

C. MR JERRY J WATTON 516
 Full Name (Last, First, Middle Initial)
 Mailing Address 2106 BLUFF ST
 City HAMBURG State IA Zip Code 51640
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2013
Transaction ID : SA11AI.139928
 Amount of Each Receipt this Period
 50.00

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: PAGE 662 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS JANELL WEBER 553
 Full Name (Last, First, Middle Initial)
 Mailing Address 50 CLAY CLIFFE DR
 City EXCELSIOR State MN Zip Code 55331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PROVISIONS Occupation SALES
 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
 10 / 15 / 2013
Transaction ID : SA11AI.140099
 Amount of Each Receipt this Period
 50.00

B. MS JANELL WEBER 553
 Full Name (Last, First, Middle Initial)
 Mailing Address 50 CLAY CLIFFE DR
 City EXCELSIOR State MN Zip Code 55331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PROVISIONS Occupation SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2013
Transaction ID : SA11AI.140102
 Amount of Each Receipt this Period
 50.00

C. MR GARY WEGNER 325
 Full Name (Last, First, Middle Initial)
 Mailing Address 6813 CEDAR LAKE DR
 City PENSACOLA State FL Zip Code 32526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CHERVON Occupation EXECUTIVE
 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 / 03 / 2013
Transaction ID : SA11AI.140165
 Amount of Each Receipt this Period
 200.00

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 663 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR HUGH WEIDEMANN 506		Date of Receipt
Mailing Address PO BOX 321		<input type="text" value="12"/> / <input type="text" value="13"/> / <input type="text" value="2013"/>
City	State	Zip Code
JANESVILLE	IA	50647
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.140176
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
FURNITURE RESTORING	SALESMAN	
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) ▼		

Full Name (Last, First, Middle Initial) B. MS JACQUELINE M WEITZ 520		Date of Receipt
Mailing Address 1001 ASSISI DR APT 302		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2013"/>
City	State	Zip Code
DUBUQUE	IA	52001
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.140245
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="150.00"/>
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 WELCH 479		Date of Receipt
Mailing Address 8924 E 400 N		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2013"/>
City	State	Zip Code
LAFAYETTE	IN	47905
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.140267
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="75.00"/>
Name of Employer	Occupation	
COLDWELL BANKER	REALTOR	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="225.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="275.00"/>
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 664 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR JAMES W WELCH 674		Date of Receipt
Mailing Address 511 GAIL DR		<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2013"/>
City	State	Zip Code
SALINA	KS	67401
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.140280
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<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="225.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MS HELEN WELLEMEYER 487		Date of Receipt
Mailing Address 116 N MAIN ST APT 4		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2013"/>
City	State	Zip Code
VASSAR	MI	48768
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.140314
<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="205.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MS SUSAN WELLS 352		Date of Receipt
Mailing Address 2321 LONGLEAF WAY		<input type="text" value="07"/> / <input type="text" value="05"/> / <input type="text" value="2013"/>
City	State	Zip Code
VESTAVIA	AL	35243
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.140338
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<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="350.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="175.00"/>
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 665 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS SUSAN WELLS 352
Full Name (Last, First, Middle Initial)

Mailing Address 2321 LONGLEAF WAY

City VESTAVIA State AL Zip Code 35243

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
 10 / 07 / 2013
Transaction ID : SA11Al.140339

Amount of Each Receipt this Period
 100.00

B. MS MARY E WELLS 809
Full Name (Last, First, Middle Initial)

Mailing Address 1115 BROADVIEW PL

City COLORADO SPRINGS State CO Zip Code 80904

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

Name of Employer SELF EMPLOYED Occupation REALTOR

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
 08 / 26 / 2013
Transaction ID : SA11Al.140351

Amount of Each Receipt this Period
 175.00

C. MR MERLE R WELSH 481
Full Name (Last, First, Middle Initial)

Mailing Address 32615 MEADOWBROOK ST.

City LIVONIA State MI Zip Code 48154

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
 11 / 18 / 2013
Transaction ID : SA11Al.140370

Amount of Each Receipt this Period
 25.00

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 666 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS LOIS L WENDL 146
 Full Name (Last, First, Middle Initial)
 Mailing Address 46 THISTLEDOWN DR
 City ROCHESTER State NY Zip Code 14617
 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 / 12 / 2013
Transaction ID : SA11AI.140400
 Amount of Each Receipt this Period
 40.00

B. MS LOIS L WENDL 146
 Full Name (Last, First, Middle Initial)
 Mailing Address 46 THISTLEDOWN DR
 City ROCHESTER State NY Zip Code 14617
 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
 11 / 12 / 2013
Transaction ID : SA11AI.140402
 Amount of Each Receipt this Period
 25.00

C. MR JESSIE B WERDUNG 325
 Full Name (Last, First, Middle Initial)
 Mailing Address 939 HOLBROOK CIR
 City FORT WALTON BEACH State FL Zip Code 32547
 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
 09 / 24 / 2013
Transaction ID : SA11AI.140442
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 165.00
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 667 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR JESSIE B WERDUNG 325		Date of Receipt
Mailing Address 939 HOLBROOK CIR		<input type="text" value="12"/> / <input type="text" value="24"/> / <input type="text" value="2013"/>
City	State	Zip Code
FORT WALTON BEACH	FL	32547
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.140441
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<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="450.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MS FRANCES A WERTZ 240		Date of Receipt
Mailing Address 6405 N BARRENS RD		<input type="text" value="09"/> / <input type="text" value="05"/> / <input type="text" value="2013"/>
City	State	Zip Code
ROANOKE	VA	24019
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.140473
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<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) C. MS FRANCES A WERTZ 240		Date of Receipt
Mailing Address 6405 N BARRENS RD		<input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2013"/>
City	State	Zip Code
ROANOKE	VA	24019
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.140472
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<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="350.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="250.00"/>
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 668 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR JACOB C WESSNER 195
 Full Name (Last, First, Middle Initial)
 Mailing Address 1585 GRIM RD
 City KUTZTOWN State PA Zip Code 19530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BATTERY MFG Occupation FACTORY
 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 / 13 / 2013
Transaction ID : SA11AI.140488
 Amount of Each Receipt this Period
 150.00

B. MR JACOB C WESSNER 195
 Full Name (Last, First, Middle Initial)
 Mailing Address 1585 GRIM RD
 City KUTZTOWN State PA Zip Code 19530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BATTERY MFG Occupation FACTORY
 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 / 16 / 2013
Transaction ID : SA11AI.140491
 Amount of Each Receipt this Period
 200.00

C. MR JACOB C WESSNER 195
 Full Name (Last, First, Middle Initial)
 Mailing Address 1585 GRIM RD
 City KUTZTOWN State PA Zip Code 19530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BATTERY MFG Occupation FACTORY
 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
 11 / 14 / 2013
Transaction ID : SA11AI.140490
 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: PAGE 669 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR JACOB C WESSNER 195
 Full Name (Last, First, Middle Initial)
 Mailing Address 1585 GRIM RD
 City KUTZTOWN State PA Zip Code 19530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BATTERY MFG Occupation FACTORY
 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
 12 / 16 / 2013
Transaction ID : SA11AI.140489
 Amount of Each Receipt this Period
 100.00

B. MS LEAH M WEST 510
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 46
 City MERIDEN State IA Zip Code 51037
 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 / 19 / 2013
Transaction ID : SA11AI.140505
 Amount of Each Receipt this Period
 300.00

C. MR CORNELIUS J WESTERMAN 650
 Full Name (Last, First, Middle Initial)
 Mailing Address 6714 STATE ROUTE C
 City LOHMAN State MO Zip Code 65053
 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
 10 / 10 / 2013
Transaction ID : SA11AI.140550
 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 670 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS CAROL WESTPHAL 604
 Full Name (Last, First, Middle Initial)
 Mailing Address 3416 BANKVIEW DR
 City JOLIET State IL Zip Code 60431
 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 / D D / Y Y Y Y Y
 12 / 10 / 2013
Transaction ID : SA11AI.140576
 Amount of Each Receipt this Period
 100.00

B. MS JULIETTE R WHEELER 210
 Full Name (Last, First, Middle Initial)
 Mailing Address 1119 STURBRIDGE RD
 City FALLSTON State MD Zip Code 21047
 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 ▼ 230.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 04 / 2013
Transaction ID : SA11AI.140633
 Amount of Each Receipt this Period
 100.00

C. MS BETTY WHEELER 327
 Full Name (Last, First, Middle Initial)
 Mailing Address 289 TERRACINA DR.
 City SANFORD State FL Zip Code 32771
 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 ▼ 215.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 16 / 2013
Transaction ID : SA11AI.140643
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 230.00
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 671 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MRS LORETTA WHEELER 590		Date of Receipt
Mailing Address 1033 FALLS CREEK DR		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2013"/>
City	State	Zip Code
COLUMBUS	MT	59019
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.140657
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
B&L RUSSELL TRUCKING	OFFICE WORKER	
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 JEAN E WHITE 195		Date of Receipt
Mailing Address 1670 ELVERSON RD		<input type="text" value="12"/> / <input type="text" value="06"/> / <input type="text" value="2013"/>
City	State	Zip Code
ELVERSON	PA	19520
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.140727
FEC ID number of contributing federal political committee. <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="325.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MS KRISTINA J WHITE 983		Date of Receipt
Mailing Address 3903 26TH AVENUE CT NW		<input type="text" value="08"/> / <input type="text" value="27"/> / <input type="text" value="2013"/>
City	State	Zip Code
GIG HARBOR	WA	98335
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.140796
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
NONE	SELF EMPLOYED	
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="400.00"/>
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 672 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

A. MS KRISTINA J WHITE 983
 Full Name (Last, First, Middle Initial)
 Mailing Address 3903 26TH AVENUE CT NW
 City State Zip Code
 GIG HARBOR WA 98335
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE SELF EMPLOYED
 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
 11 / 27 / 2013
Transaction ID : SA11AI.140797
 Amount of Each Receipt this Period
 100.00

B. MS SUE T WHITFIELD 770
 Full Name (Last, First, Middle Initial)
 Mailing Address 4265 SAN FELIPE ST STE 603
 City State Zip Code
 HOUSTON TX 77027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF EMPLOYED INVESTOR
 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 / 15 / 2013
Transaction ID : SA11AI.140822
 Amount of Each Receipt this Period
 200.00

C. MS SUE T WHITFIELD 770
 Full Name (Last, First, Middle Initial)
 Mailing Address 4265 SAN FELIPE ST STE 603
 City State Zip Code
 HOUSTON TX 77027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF EMPLOYED INVESTOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 03 / 2013
Transaction ID : SA11AI.140823
 Amount of Each Receipt this Period
 300.00

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 673 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR EMMETT L WHITMORE 584
 Full Name (Last, First, Middle Initial)
 Mailing Address 2595 HIGHWAY 3
 City STEELE State ND Zip Code 58482
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SEMI RETIRED Occupation SELF EMPLOYED
 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
 12 / 26 / 2013
Transaction ID : SA11AI.140852
 Amount of Each Receipt this Period
 50.00

B. MS ALBA J WHITNEY 336
 Full Name (Last, First, Middle Initial)
 Mailing Address 12401 N 22ND ST APT D405
 City TAMPA State FL Zip Code 33612
 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
 11 / 26 / 2013
Transaction ID : SA11AI.140861
 Amount of Each Receipt this Period
 35.00

C. MR THOMAS C WHITNEY 430
 Full Name (Last, First, Middle Initial)
 Mailing Address 27118 CAVALLO RD
 City DANVILLE State OH Zip Code 43014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SEMI-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 / 09 / 2013
Transaction ID : SA11AI.140869
 Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 235.00
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 674 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MRS JANICE WILBER 427		Date of Receipt
Mailing Address 2087 ROUND BND. RD.		<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City	State	Zip Code
MAGNOLIA	KY	42757
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.141028
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"/>	

Full Name (Last, First, Middle Initial) B. Rita Wilhelm 488		Date of Receipt
Mailing Address 884 Pebblebrook Lane		<input type="text" value="09"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>
City	State	Zip Code
Eas	MI	48823
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.147589
Name of Employer	Occupation	Amount of Each Receipt this Period
Cluttergone	Professional Organizer	<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) C. MS HELEN WILLIAMS 026		Date of Receipt
Mailing Address 3285 MAIN ST		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2013"/>
City	State	Zip Code
BREWSTER	MA	02631
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.141142
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="150.00"/>
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"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="500.00"/>
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 675 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR THOMAS WILLIAMS 781			Date of Receipt
Mailing Address PO BOX 127			<input type="text" value="07"/> / <input type="text" value="08"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11Al.141305
SCHERTZ	TX	78154	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="250.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MR THOMAS WILLIAMS 781			Date of Receipt
Mailing Address PO BOX 127			<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11Al.141301
SCHERTZ	TX	78154	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="350.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. MR THOMAS WILLIAMS 781			Date of Receipt
Mailing Address PO BOX 127			<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11Al.141304
SCHERTZ	TX	78154	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="450.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="250.00"/>
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 676 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS GLADYS L WILLIAMS 801		Date of Receipt
Mailing Address PO BOX 188		<input type="text" value="12"/> / <input type="text" value="02"/> / <input type="text" value="2013"/>
City	State	Zip Code
ELBERT	CO	80106
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.141312
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"/>	

Full Name (Last, First, Middle Initial) B. MS DEBRA J WILLIAMS 985		Date of Receipt
Mailing Address 8910 SELECT CT SE		<input type="text" value="07"/> / <input type="text" value="25"/> / <input type="text" value="2013"/>
City	State	Zip Code
OLYMPIA	WA	98501
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.141334
Name of Employer	Occupation	Amount of Each Receipt this Period
THE SPA DEPOT	SELF EMPLOYED	<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="400.00"/>	

Full Name (Last, First, Middle Initial) C. MS DEBRA J WILLIAMS 985		Date of Receipt
Mailing Address 8910 SELECT CT SE		<input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2013"/>
City	State	Zip Code
OLYMPIA	WA	98501
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.141335
Name of Employer	Occupation	Amount of Each Receipt this Period
THE SPA DEPOT	SELF EMPLOYED	<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="650.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="550.00"/>
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 677 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR JOHN R WILLIS 394
 Full Name (Last, First, Middle Initial)
 Mailing Address 14 TOP OF HILL LN
 City CARRIERE State MS Zip Code 39426
 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 / 08 / 2013
Transaction ID : SA11AI.141379
 Amount of Each Receipt this Period
 100.00

B. MR ALEXANDER D WILSON 173 ESQ
 Full Name (Last, First, Middle Initial)
 Mailing Address 29 WOODLAND DR
 City SHREWSBURY State PA Zip Code 17361
 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 ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 26 / 2013
Transaction ID : SA11AI.141451
 Amount of Each Receipt this Period
 175.00

C. MR ALEXANDER D WILSON 173 ESQ
 Full Name (Last, First, Middle Initial)
 Mailing Address 29 WOODLAND DR
 City SHREWSBURY State PA Zip Code 17361
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 18 / 2013
Transaction ID : SA11AI.141452
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00
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 678 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR ALEXANDER D WILSON 212
 Full Name (Last, First, Middle Initial)
 Mailing Address 5506 ROLAND AVE
 City BALTIMORE State MD Zip Code 21210
 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 / 19 / 2013
Transaction ID : SA11AI.141462
 Amount of Each Receipt this Period
 100.00

B. MR ALEXANDER D WILSON 212
 Full Name (Last, First, Middle Initial)
 Mailing Address 5506 ROLAND AVE
 City BALTIMORE State MD Zip Code 21210
 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
 07 / 29 / 2013
Transaction ID : SA11AI.141463
 Amount of Each Receipt this Period
 100.00

C. MRS FRANCES H WILSON 396
 Full Name (Last, First, Middle Initial)
 Mailing Address 1830 P P WILSON RD
 City OSYKA State MS Zip Code 39657
 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
 11 / 26 / 2013
Transaction ID : SA11AI.141497
 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 679 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS MARY J WILSON 554
Full Name (Last, First, Middle Initial)

Mailing Address 8300 GOLDEN VALLEY RD APT 330

City MINNEAPOLIS	State MN	Zip Code 55427
---------------------	-------------	-------------------

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
12	/	11	/	2013

Transaction ID : SA11AI.141529

Amount of Each Receipt this Period
100.00

B. MS NORMA F WILSON 812
Full Name (Last, First, Middle Initial)

Mailing Address 725 B ST

City PENROSE	State CO	Zip Code 81240
-----------------	-------------	-------------------

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 ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	16	/	2013

Transaction ID : SA11AI.141583

Amount of Each Receipt this Period
100.00

C. MS JOYCE C WINGARD 163
Full Name (Last, First, Middle Initial)

Mailing Address 53 CRESTVIEW BLVD

City WARREN	State PA	Zip Code 16365
----------------	-------------	-------------------

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
12	/	03	/	2013

Transaction ID : SA11AI.141645

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 680 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS MADONNA K WINNER 453
 Full Name (Last, First, Middle Initial)
 Mailing Address 1951 STATE ROUTE 502
 City GREENVILLE State OH Zip Code 45331
 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 ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 16 / 2013
Transaction ID : SA11Al.141667
 Amount of Each Receipt this Period
 100.00

B. MS JANET L WITHAM 752
 Full Name (Last, First, Middle Initial)
 Mailing Address 5807 MCCOMMAS BLVD APT E
 City DALLAS State TX Zip Code 75206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SWINGLE COLLINS 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 / 05 / 2013
Transaction ID : SA11Al.141778
 Amount of Each Receipt this Period
 75.00

C. MR SHAWN WITT 787
 Full Name (Last, First, Middle Initial)
 Mailing Address 13445 TAMAYO DR
 City AUSTIN State TX Zip Code 78729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PROFORMANCE FOOD SERVICE Occupation EXECUTIVE
 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
 11 / 04 / 2013
Transaction ID : SA11Al.141797
 Amount of Each Receipt this Period
 150.00

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:	PAGE 681 OF 724
	(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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR DUANE S WOEBBEKING 506			Date of Receipt
Mailing Address 1270 HIGHWAY T47			<input type="text" value="07"/> / <input type="text" value="22"/> / <input type="text" value="2013"/>
City GLADBROOK	State IA	Zip Code 50635	Transaction ID : SA11Al.141816
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="50.00"/>
Name of Employer WOEBBEKING ENTERPRISES LTD	Occupation PARTNER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>		

Full Name (Last, First, Middle Initial) B. MR DUANE S WOEBBEKING 506			Date of Receipt
Mailing Address 1270 HIGHWAY T47			<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2013"/>
City GLADBROOK	State IA	Zip Code 50635	Transaction ID : SA11Al.141817
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="50.00"/>
Name of Employer WOEBBEKING ENTERPRISES LTD	Occupation PARTNER		
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"/>		

Full Name (Last, First, Middle Initial) C. MS JEAN H WOLF 180			Date of Receipt
Mailing Address 1125 KIRKLAND VILLAGE CIR			<input type="text" value="08"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City BETHLEHEM	State PA	Zip Code 18017	Transaction ID : SA11Al.141854
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="10.00"/>
Name of Employer NONE	Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="480.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="110.00"/>
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 682 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS JEAN H WOLF 180
 Full Name (Last, First, Middle Initial)
 Mailing Address 1125 KIRKLAND VILLAGE CIR
 City State Zip Code
 BETHLEHEM PA 18017
 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 ▼
 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 29 / 2013
Transaction ID : SA11Al.141855
 Amount of Each Receipt this Period
 100.00

B. MS JEAN H WOLF 180
 Full Name (Last, First, Middle Initial)
 Mailing Address 1125 KIRKLAND VILLAGE CIR
 City State Zip Code
 BETHLEHEM PA 18017
 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 ▼
 590.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2013
Transaction ID : SA11Al.141856
 Amount of Each Receipt this Period
 100.00

C. R KENNETH WOLFE 435
 Full Name (Last, First, Middle Initial)
 Mailing Address 8627 AUGUSTA LN
 City State Zip Code
 HOLLAND OH 43528
 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 ▼
 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 22 / 2013
Transaction ID : SA11Al.141883
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 210.00
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 683 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS MATHA I WOLFGANG 852
Full Name (Last, First, Middle Initial)

Mailing Address 6945 E MAIN ST APT 1303

City MESA	State AZ	Zip Code 85207
--------------	-------------	-------------------

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	/	04	/	2013

Transaction ID : SA11AI.141906

Amount of Each Receipt this Period
100.00

B. MS MATHA I WOLFGANG 852
Full Name (Last, First, Middle Initial)

Mailing Address 6945 E MAIN ST APT 1303

City MESA	State AZ	Zip Code 85207
--------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	20	/	2013

Transaction ID : SA11AI.141904

Amount of Each Receipt this Period
25.00

C. MS MATHA I WOLFGANG 852
Full Name (Last, First, Middle Initial)

Mailing Address 6945 E MAIN ST APT 1303

City MESA	State AZ	Zip Code 85207
--------------	-------------	-------------------

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
12	/	20	/	2013

Transaction ID : SA11AI.141905

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: PAGE 684 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR PRESTON G WOOD 088
 Full Name (Last, First, Middle Initial)
 Mailing Address 11 LANDSDOWN RD
 City ANNANDALE State NJ Zip Code 08801
 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
 11 / 27 / 2013
Transaction ID : SA11AI.141953
 Amount of Each Receipt this Period
 150.00

B. MR CLAY WOOD 797
 Full Name (Last, First, Middle Initial)
 Mailing Address 16 SAN CLEMENTE CIR
 City ODESSA State TX Zip Code 79765
 FEC ID number of contributing federal political committee. **C**
 Name of Employer WESTERN NATIONAL BANK Occupation PRESIDENT & CEO
 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 / 14 / 2013
Transaction ID : SA11AI.142006
 Amount of Each Receipt this Period
 100.00

C. MR CLAY WOOD 797
 Full Name (Last, First, Middle Initial)
 Mailing Address 16 SAN CLEMENTE CIR
 City ODESSA State TX Zip Code 79765
 FEC ID number of contributing federal political committee. **C**
 Name of Employer WESTERN NATIONAL BANK Occupation PRESIDENT & CEO
 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
 11 / 14 / 2013
Transaction ID : SA11AI.142007
 Amount of Each Receipt this Period
 100.00

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 685 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS MILDRED R WOODARD 710		Date of Receipt
Mailing Address 103 LAUREL CIR		<input type="text" value="07"/> / <input type="text" value="09"/> / <input type="text" value="2013"/>
City	State	Zip Code
MINDEN	LA	71055
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.142026
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="275.00"/>	

Full Name (Last, First, Middle Initial) B. MR DOUG WOODS 573		Date of Receipt
Mailing Address 38747 SD HIGHWAY 46		<input type="text" value="09"/> / <input type="text" value="10"/> / <input type="text" value="2013"/>
City	State	Zip Code
LAKE ANDES	SD	57356
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.142078
Name of Employer	Occupation	Amount of Each Receipt this Period
REFUSED	REFUSED	<input type="text" value="35.00"/>
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"/>	

Full Name (Last, First, Middle Initial) C. MS MARILYN J WOOTEN 600		Date of Receipt
Mailing Address 67 ROUND BARN RD		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2013"/>
City	State	Zip Code
BARRINGTON	IL	60010
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.142143
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	HOMEMAKER	<input type="text" value="35.00"/>
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"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="95.00"/>
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 686 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR TIMOTHY D WORD 782
 Full Name (Last, First, Middle Initial)
 Mailing Address 401 TORCIDO DR
 City SAN ANTONIO State TX Zip Code 78209
 Date of Receipt: 07 / 30 / 2013
 Transaction ID : SA11AI.142147
 Amount of Each Receipt this Period: 50.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: TORCIDO RISK MANAGEMENT LLC Occupation: PRINCIPAL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date: 300.00

B. MR TIMOTHY D WORD 782
 Full Name (Last, First, Middle Initial)
 Mailing Address 401 TORCIDO DR
 City SAN ANTONIO State TX Zip Code 78209
 Date of Receipt: 09 / 27 / 2013
 Transaction ID : SA11AI.142146
 Amount of Each Receipt this Period: 200.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: TORCIDO RISK MANAGEMENT LLC Occupation: PRINCIPAL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date: 500.00

C. MS RUBY K WREN 760
 Full Name (Last, First, Middle Initial)
 Mailing Address 1421 J E WOODY RD
 City SPRINGTOWN State TX Zip Code 76082
 Date of Receipt: 08 / 28 / 2013
 Transaction ID : SA11AI.142195
 Amount of Each Receipt this Period: 50.00
 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

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 687 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS SHIRLEY J WRIGHT 453
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 90
 City WEST MANCHESTER State OH Zip Code 45382
 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 / 30 / 2013
Transaction ID : SA11AI.142224
 Amount of Each Receipt this Period
 100.00

B. MS SHIRLEY J WRIGHT 453
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 90
 City WEST MANCHESTER State OH Zip Code 45382
 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
 11 / 29 / 2013
Transaction ID : SA11AI.142225
 Amount of Each Receipt this Period
 50.00

C. MR DENNIS WRIGHT 467
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 612
 City AVILLA State IN Zip Code 46710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer WRICO INC Occupation SELF EMPLOYED
 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 / 06 / 2013
Transaction ID : SA11AI.142226
 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: (check only one)	PAGE 688 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. DR JOHN L WRIGHT 617 MD		Date of Receipt
Mailing Address 801 BROADMOOR DR		<input type="text" value="09"/> / <input type="text" value="03"/> / <input type="text" value="2013"/>
City State Zip Code BLOOMINGTON IL 61704		Transaction ID : SA11AI.142235
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="10.00"/>
Name of Employer SELF EMPLOYED	Occupation PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) B. DR JOHN L WRIGHT 617 MD		Date of Receipt
Mailing Address 801 BROADMOOR DR		<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2013"/>
City State Zip Code BLOOMINGTON IL 61704		Transaction ID : SA11AI.142234
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="10.00"/>
Name of Employer SELF EMPLOYED	Occupation PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="260.00"/>	

Full Name (Last, First, Middle Initial) C. MR SAM WRIGHT 754		Date of Receipt
Mailing Address 1318 COUNTY ROAD 15190		<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2013"/>
City State Zip Code BLOSSOM TX 75416		Transaction ID : SA11AI.142247
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer NONE	Occupation RETIRED	
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="120.00"/>
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 689 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MR SAM WRIGHT 754
Full Name (Last, First, Middle Initial)

Mailing Address 1318 COUNTY ROAD 15190

City BLOSSOM	State TX	Zip Code 75416
-----------------	-------------	-------------------

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
11	/	25	/	2013

Transaction ID : SA11AI.142246

Amount of Each Receipt this Period
100.00

B. MR DENNIS WURZELBACHER 452
Full Name (Last, First, Middle Initial)

Mailing Address 3561 W KEMPER RD

City CINCINNATI	State OH	Zip Code 45251
--------------------	-------------	-------------------

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

Name of Employer NONE	Occupation SELF EMPLOYED
--------------------------	-----------------------------

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	/	16	/	2013

Transaction ID : SA11AI.142322

Amount of Each Receipt this Period
150.00

C. MR DENNIS WURZELBACHER 452
Full Name (Last, First, Middle Initial)

Mailing Address 3561 W KEMPER RD

City CINCINNATI	State OH	Zip Code 45251
--------------------	-------------	-------------------

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

Name of Employer NONE	Occupation SELF EMPLOYED
--------------------------	-----------------------------

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
11	/	18	/	2013

Transaction ID : SA11AI.142323

Amount of Each Receipt this Period
75.00

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:	PAGE 690 OF 724
	(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

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)
CONSERVATIVE MAJORITY FUND

A. MR DENNIS WURZELBACHER 452
 Full Name (Last, First, Middle Initial)
 Mailing Address 3561 W KEMPER RD
 City CINCINNATI State OH Zip Code 45251
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 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
 12 / 13 / 2013
Transaction ID : SA11AI.142326
 Amount of Each Receipt this Period
 50.00

B. MS DOROTHY B WYATT 283
 Full Name (Last, First, Middle Initial)
 Mailing Address 515 WINDWOOD ON SKYE
 City FAYETTEVILLE State NC Zip Code 28303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 07 / 2013
Transaction ID : SA11AI.142333
 Amount of Each Receipt this Period
 175.00

C. JO ELLEN YATES 283
 Full Name (Last, First, Middle Initial)
 Mailing Address 125 BROOKLINE DR
 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 ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 13 / 2013
Transaction ID : SA11AI.142420
 Amount of Each Receipt this Period
 50.00

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 691 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR ORVAN YODER 465			Date of Receipt
Mailing Address PO BOX 144			<input type="text" value="08"/> / <input type="text" value="12"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11AI.142481
TOPEKA	IN	46571	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		
OK SAW AND TOOL INC	SALES		
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 ORVAN YODER 465			Date of Receipt
Mailing Address PO BOX 144			<input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11AI.147692
TOPEKA	IN	46571	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		
OK SAW AND TOOL INC	SALES		
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) C. MR EDWARD D YODER 467			Date of Receipt
Mailing Address 1818 S 800 E			<input type="text" value="08"/> / <input type="text" value="08"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : SA11AI.142482
BLUFFTON	IN	46714	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		
ORNAMENTAL SHRUB & TREE SERVICES	BUSINESS OWNER		
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) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="175.00"/>
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 692 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MS JUDITH A YOUNG 454
 Full Name (Last, First, Middle Initial)
 Mailing Address 4270 SARAHS WAY
 City DAYTON State OH Zip Code 45440
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 23 / 2013
Transaction ID : SA11AI.142560
 Amount of Each Receipt this Period
 100.00

B. MS JUDITH A YOUNG 454
 Full Name (Last, First, Middle Initial)
 Mailing Address 4270 SARAHS WAY
 City DAYTON State OH Zip Code 45440
 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
 10 / 23 / 2013
Transaction ID : SA11AI.142561
 Amount of Each Receipt this Period
 100.00

C. MRS VERNESE G YOUNG 588
 Full Name (Last, First, Middle Initial)
 Mailing Address 4734 119TH RD NW LOT 209
 City EPPING State ND Zip Code 58843
 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 / 15 / 2013
Transaction ID : SA11AI.142574
 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 693 OF 724
	<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)
CONSERVATIVE MAJORITY FUND

A. MRS VERNESE G YOUNG 588
Full Name (Last, First, Middle Initial)

Mailing Address 4734 119TH RD NW LOT 209

City EPPING	State ND	Zip Code 58843
----------------	-------------	-------------------

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
11	/	18	/	2013

Transaction ID : SA11AI.142577

Amount of Each Receipt this Period
100.00

B. MS KATHLEEN YOUNG 840
Full Name (Last, First, Middle Initial)

Mailing Address 581 W 760 N

City OREM	State UT	Zip Code 84057
--------------	-------------	-------------------

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
10	/	11	/	2013

Transaction ID : SA11AI.142592

Amount of Each Receipt this Period
100.00

C. MS FRANCES YOUNG 844
Full Name (Last, First, Middle Initial)

Mailing Address 975 STOWE DR

City OGDEN	State UT	Zip Code 84404
---------------	-------------	-------------------

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	/	26	/	2013

Transaction ID : SA11AI.147698

Amount of Each Receipt this Period
200.00

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 694 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR ROBERT A YOUNG 857
 Full Name (Last, First, Middle Initial)
 Mailing Address 616 W QUIET SPRINGS DR
 City ORO VALLEY State AZ Zip Code 85755
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 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
 09 / 09 / 2013
Transaction ID : SA11AI.142597
 Amount of Each Receipt this Period
 50.00

B. MR FRANK E YURMAN 074
 Full Name (Last, First, Middle Initial)
 Mailing Address 326 WYCKOFF AVE
 City WALDWICK State NJ Zip Code 07463
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 REFUSED REFUSED
 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 / 24 / 2013
Transaction ID : SA11AI.142649
 Amount of Each Receipt this Period
 75.00

C. MR JAMES ZAJAC 193
 Full Name (Last, First, Middle Initial)
 Mailing Address 121 S SANDY HILL RD
 City COATESVILLE State PA Zip Code 19320
 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
 09 / 26 / 2013
Transaction ID : SA11AI.142662
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 160.00
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 695 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR JAMES ZAJAC 193
 Full Name (Last, First, Middle Initial)
 Mailing Address 121 S SANDY HILL RD
 City COATESVILLE State PA Zip Code 19320
 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
 12 / 11 / 2013
Transaction ID : SA11AI.142661
 Amount of Each Receipt this Period
 50.00

B. MS SHEILA K ZALLA 410
 Full Name (Last, First, Middle Initial)
 Mailing Address 3343 STONEWOOD DR
 City ERLANGER State KY Zip Code 41018
 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 ▼ 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2013
Transaction ID : SA11AI.142674
 Amount of Each Receipt this Period
 250.00

C. MR FRANK ZGODA 141 JR
 Full Name (Last, First, Middle Initial)
 Mailing Address 57 CLEVELAND AVE
 City TONAWANDA State NY Zip Code 14150
 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 / 12 / 2013
Transaction ID : SA11AI.142743
 Amount of Each Receipt this Period
 75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00
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 696 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR FRANK ZGODA 141 JR
 Full Name (Last, First, Middle Initial)
 Mailing Address 57 CLEVELAND AVE
 City TONAWANDA State NY Zip Code 14150
 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
 11 / 12 / 2013
Transaction ID : SA11AI.142742
 Amount of Each Receipt this Period
 75.00

B. MS WILMA F ZINN 625
 Full Name (Last, First, Middle Initial)
 Mailing Address 3985 CHRISTMAS TREE RD
 City DECATUR State IL Zip Code 62521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 08 / 2013
Transaction ID : SA11AI.142812
 Amount of Each Receipt this Period
 50.00

C. MS WILMA F ZINN 625
 Full Name (Last, First, Middle Initial)
 Mailing Address 3985 CHRISTMAS TREE RD
 City DECATUR State IL Zip Code 62521
 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 ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2013
Transaction ID : SA11AI.142813
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
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 697 OF 724
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. Full Name (Last, First, Middle Initial)
MR ERNST W ZWART 395

Mailing Address 7914 EWA PL

City State Zip Code
DIAMONDHEAD MS 39525

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 / D D / Y Y Y Y Y Y
 08 / 13 / 2013
Transaction ID : SA11AI.142874

Amount of Each Receipt this Period
200.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	223833.00

**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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial)

A. ACTIVE ENGAGEMENT

Mailing Address 44084 RIVERSIDE PKWY
SUITE 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement
eMAIL FUNDRAISING

003

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 19 / 2013

Transaction ID : **SB21B.147729**

Amount of Each Disbursement this Period

1523.00

Full Name (Last, First, Middle Initial)

B. ACTIVE ENGAGEMENT

Mailing Address 44084 RIVERSIDE PKWY
SUITE 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement
eMAIL FUNDRAISING

003

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 11 / 2013

Transaction ID : **SB21B.147730**

Amount of Each Disbursement this Period

1523.00

Full Name (Last, First, Middle Initial)

C. ACTIVE ENGAGEMENT

Mailing Address 44084 RIVERSIDE PKWY
SUITE 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement
eMAIL FUNDRAISING

003

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2013

Transaction ID : **SB21B.147731**

Amount of Each Disbursement this Period

3100.00

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

6146.00

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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial)

A. ACTIVE ENGAGEMENT

Mailing Address 44084 RIVERSIDE PKWY
SUITE 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement
eMAIL FUNDRAISING

003

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 24 / 2013

Transaction ID : **SB21B.147732**

Amount of Each Disbursement this Period

11920.00

Full Name (Last, First, Middle Initial)

B. ACTIVE ENGAGEMENT

Mailing Address 44084 RIVERSIDE PKWY
SUITE 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement
eMAIL FUNDRAISING

003

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 01 / 2013

Transaction ID : **SB21B.147733**

Amount of Each Disbursement this Period

23120.00

Full Name (Last, First, Middle Initial)

C. ACTIVE ENGAGEMENT

Mailing Address 44084 RIVERSIDE PKWY
SUITE 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement
eMAIL FUNDRAISING

003

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 08 / 2013

Transaction ID : **SB21B.147734**

Amount of Each Disbursement this Period

1700.00

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

36740.00

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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial)

A. ACTIVE ENGAGEMENT

Mailing Address 44084 RIVERSIDE PKWY
SUITE 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement
eMAIL FUNDRAISING

003

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 15 / 2013

Transaction ID : **SB21B.147735**

Amount of Each Disbursement this Period

2100.00

Full Name (Last, First, Middle Initial)

B. ACTIVE ENGAGEMENT

Mailing Address 44084 RIVERSIDE PKWY
SUITE 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement
eMAIL FUNDRAISING

003

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 22 / 2013

Transaction ID : **SB21B.147736**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. ACTIVE ENGAGEMENT

Mailing Address 44084 RIVERSIDE PKWY
SUITE 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement
eMAIL FUNDRAISING

003

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 29 / 2013

Transaction ID : **SB21B.147737**

Amount of Each Disbursement this Period

1100.00

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

4200.00

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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial)

A. ACTIVE ENGAGEMENT

Mailing Address 44084 RIVERSIDE PKWY
SUITE 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement
eMAIL FUNDRAISING

003

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 05 / 2013

Transaction ID : SB21B.147738

Amount of Each Disbursement this Period

728.09

Full Name (Last, First, Middle Initial)

B. ACTIVE ENGAGEMENT

Mailing Address 44084 RIVERSIDE PKWY
SUITE 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement
eMAIL FUNDRAISING

003

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 12 / 2013

Transaction ID : SB21B.147739

Amount of Each Disbursement this Period

2077.00

Full Name (Last, First, Middle Initial)

C. ACTIVE ENGAGEMENT

Mailing Address 44084 RIVERSIDE PKWY
SUITE 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement
eMAIL FUNDRAISING

003

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 19 / 2013

Transaction ID : SB21B.147740

Amount of Each Disbursement this Period

1000.00

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

3805.09

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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial)

A. ACTIVE ENGAGEMENT

Mailing Address 44084 RIVERSIDE PKWY
SUITE 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement
eMAIL FUNDRAISING

003

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 05 / 2013

Transaction ID : SB21B.147741

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. ACTIVE ENGAGEMENT

Mailing Address 44084 RIVERSIDE PKWY
SUITE 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement
eMAIL FUNDRAISING

003

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 17 / 2013

Transaction ID : SB21B.147742

Amount of Each Disbursement this Period

446.00

Full Name (Last, First, Middle Initial)

C. ACTIVE ENGAGEMENT

Mailing Address 44084 RIVERSIDE PKWY
SUITE 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement
eMAIL FUNDRAISING

003

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2013

Transaction ID : SB21B.147743

Amount of Each Disbursement this Period

9625.00

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

11071.00

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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial)

A. AMBASSADOR ACCOUNTING

Mailing Address 7521 PRESIDENTIAL LN

City MANASSAS State VA Zip Code 20109

Purpose of Disbursement
ESCROW SERVICES

001

Candidate Name

CONSERVATIVE MAJORITY FUND

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		1	1		2	0	1	3

Transaction ID : SB21B.147725

Amount of Each Disbursement this Period

2	6	2	5	0
---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. AMBASSADOR ACCOUNTING

Mailing Address 7521 PRESIDENTIAL LN

City MANASSAS State VA Zip Code 20109

Purpose of Disbursement
ESCROW SERVICES

001

Candidate Name

CONSERVATIVE MAJORITY FUND

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
1	0		0	8		2	0	1	3

Transaction ID : SB21B.147726

Amount of Each Disbursement this Period

1	7	4	1	6
---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. AMBASSADOR ACCOUNTING

Mailing Address 7521 PRESIDENTIAL LN

City MANASSAS State VA Zip Code 20109

Purpose of Disbursement
ESCROW SERVICES

001

Candidate Name

CONSERVATIVE MAJORITY FUND

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
1	1		0	5		2	0	1	3

Transaction ID : SB21B.147727

Amount of Each Disbursement this Period

1	4	5	8	8
---	---	---	---	---

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

5	8	2	5	4
---	---	---	---	---

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

5	8	2	5	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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial)

A. AMBASSADOR ACCOUNTING

Mailing Address 7521 PRESIDENTIAL LN

City MANASSAS State VA Zip Code 20109

Purpose of Disbursement
ESCROW SERVICES

Category/
Type

Candidate Name
CONSERVATIVE MAJORITY FUND

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

Transaction ID : SB21B.147728

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. BB+T BANK

Mailing Address 2000 WILSON BLVD

City ARLINGTON State VA Zip Code 22203

Purpose of Disbursement
BANK CHARGE

Category/
Type

Candidate Name
CONSERVATIVE MAJORITY FUND

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

Transaction ID : SB21B.147724

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. ELECTRONIC REPORTING SYSTEMS INC

Mailing Address 683 BERRYVILLE AVE

City WINCHESTER State VA Zip Code 22601

Purpose of Disbursement
ELECTRONIC DISCLOSURE REPORTING

Category/
Type

Candidate Name
CONSERVATIVE MAJORITY FUND

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

Transaction ID : SB21B.143185

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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial)

A. FIRSTMERIT BANK NA

Mailing Address 295 FIRSTMERIT CIRCLE

City AKRON State OH Zip Code 44307

Purpose of Disbursement
BANK CHARGES

001

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 31 / 2013

Transaction ID : SB21B.143143

Amount of Each Disbursement this Period

8866.49

Full Name (Last, First, Middle Initial)

B. FIRSTMERIT BANK NA

Mailing Address 295 FIRSTMERIT CIRCLE

City AKRON State OH Zip Code 44307

Purpose of Disbursement
BANK CHARGES

001

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2013

Transaction ID : SB21B.143144

Amount of Each Disbursement this Period

8099.97

Full Name (Last, First, Middle Initial)

C. FIRSTMERIT BANK NA

Mailing Address 295 FIRSTMERIT CIRCLE

City AKRON State OH Zip Code 44307

Purpose of Disbursement
BANK CHARGES

001

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2013

Transaction ID : SB21B.143145

Amount of Each Disbursement this Period

6719.05

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

23685.51

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)

<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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. FIRSTMERIT BANK NA		Date of Disbursement MM / DD / YYYY 10 / 31 / 2013
Mailing Address 295 FIRSTMERIT CIRCLE		Transaction ID : SB21B.143146
City AKRON	State OH	
Purpose of Disbursement BANK CHARGES	Category/ Type 001	Amount of Each Disbursement this Period 5404.92
Candidate Name CONSERVATIVE MAJORITY FUND		
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. FIRSTMERIT BANK NA		Date of Disbursement MM / DD / YYYY 11 / 30 / 2013
Mailing Address 295 FIRSTMERIT CIRCLE		Transaction ID : SB21B.143147
City AKRON	State OH	
Purpose of Disbursement BANK CHARGES	Category/ Type 001	Amount of Each Disbursement this Period 6420.28
Candidate Name CONSERVATIVE MAJORITY FUND		
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. FIRSTMERIT BANK NA		Date of Disbursement MM / DD / YYYY 12 / 31 / 2013
Mailing Address 295 FIRSTMERIT CIRCLE		Transaction ID : SB21B.143148
City AKRON	State OH	
Purpose of Disbursement BANK CHARGES	Category/ Type 001	Amount of Each Disbursement this Period 4527.52
Candidate Name CONSERVATIVE MAJORITY FUND		
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).....▶	16352.72
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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial)

A. GLOBAL ALLIANCE COMMUNICATIONS INC

Mailing Address 6 KLINE CT

City STAFFORD State VA Zip Code 22556

Purpose of Disbursement
CONSULTING - DEVELOPMENT

001

Candidate Name

CONSERVATIVE MAJORITY FUND

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
10			25			2013			

Transaction ID : **SB21B.143186**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. GRISWOLD & GRISWOLD

Mailing Address 1919 DUKE STREET
SUITE 200

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
PAC DIRECT MAIL - PRINTING & MAILSHOP

003

Candidate Name

CONSERVATIVE MAJORITY FUND

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
10			24			2013			

Transaction ID : **SB21B.147748**

Amount of Each Disbursement this Period

9200.00

Full Name (Last, First, Middle Initial)

C. GRISWOLD & GRISWOLD

Mailing Address 1919 DUKE STREET
SUITE 200

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CONSULTING - FUNDRAISING

001

Candidate Name

CONSERVATIVE MAJORITY FUND

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
11			14			2013			

Transaction ID : **SB21B.143189**

Amount of Each Disbursement this Period

800.00

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

12500.00

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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial)

A. GRISWOLD & GRISWOLD

Mailing Address 1919 DUKE STREET
SUITE 200

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CONSULTING - FUNDRAISING

001

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 23 / 2013

Transaction ID : **SB21B.143190**

Amount of Each Disbursement this Period

1800.00

Full Name (Last, First, Middle Initial)

B. GRISWOLD & GRISWOLD

Mailing Address 1919 DUKE STREET
SUITE 200

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
DIRECT MAIL FUNDRAISING

003

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2013

Transaction ID : **SB21B.147746**

Amount of Each Disbursement this Period

12289.96

Full Name (Last, First, Middle Initial)

C. INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement
TELEMARKETING SERVICES

003

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 02 / 2013

Transaction ID : **SB21B.143154**

Amount of Each Disbursement this Period

46551.75

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

60641.71

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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial)

A. INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement
TELEMARKETING SERVICES

003

Candidate Name
CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
07 / 08 / 2013

Transaction ID : SB21B.143155

Amount of Each Disbursement this Period

57954.29

Full Name (Last, First, Middle Initial)

B. INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement
TELEMARKETING SERVICES

003

Candidate Name
CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
07 / 12 / 2013

Transaction ID : SB21B.143156

Amount of Each Disbursement this Period

43246.95

Full Name (Last, First, Middle Initial)

C. INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement
TELEMARKETING SERVICES

003

Candidate Name
CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
07 / 19 / 2013

Transaction ID : SB21B.143157

Amount of Each Disbursement this Period

32476.15

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

133677.39

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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial)

A. INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement
TELEMARKETING SERVICES

003

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2013

Transaction ID : SB21B.143158

Amount of Each Disbursement this Period

36800.42

Full Name (Last, First, Middle Initial)

B. INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement
TELEMARKETING SERVICES

003

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 19 / 2013

Transaction ID : SB21B.143159

Amount of Each Disbursement this Period

56625.98

Full Name (Last, First, Middle Initial)

C. INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement
TELEMARKETING SERVICES

003

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 28 / 2013

Transaction ID : SB21B.143160

Amount of Each Disbursement this Period

66484.42

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

159910.82

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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial)

A. INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement
TELEMARKETING SERVICES

003

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 06 / 2013

Transaction ID : **SB21B.143161**

Amount of Each Disbursement this Period

58690.48

Full Name (Last, First, Middle Initial)

B. INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement
TELEMARKETING SERVICES

003

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 12 / 2013

Transaction ID : **SB21B.143162**

Amount of Each Disbursement this Period

32062.26

Full Name (Last, First, Middle Initial)

C. INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement
TELEMARKETING SERVICES

003

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 24 / 2013

Transaction ID : **SB21B.143163**

Amount of Each Disbursement this Period

39075.62

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

129828.36

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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial)

A. INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement
TELEMARKETING SERVICES

003

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 26 / 2013

Transaction ID : SB21B.143164

Amount of Each Disbursement this Period

28386.44

Full Name (Last, First, Middle Initial)

B. INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement
TELEMARKETING SERVICES

003

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 04 / 2013

Transaction ID : SB21B.143165

Amount of Each Disbursement this Period

21979.22

Full Name (Last, First, Middle Initial)

C. INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement
TELEMARKETING SERVICES

003

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 15 / 2013

Transaction ID : SB21B.143166

Amount of Each Disbursement this Period

45330.93

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

95696.59

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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial)

A. INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement
TELEMARKETING SERVICES

003

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 17 / 2013

Transaction ID : **SB21B.143167**

Amount of Each Disbursement this Period

48031.07

Full Name (Last, First, Middle Initial)

B. INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement
TELEMARKETING SERVICES

003

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 07 / 2013

Transaction ID : **SB21B.143168**

Amount of Each Disbursement this Period

46351.54

Full Name (Last, First, Middle Initial)

C. INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement
TELEMARKETING SERVICES

003

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 13 / 2013

Transaction ID : **SB21B.143169**

Amount of Each Disbursement this Period

44769.30

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

139151.91

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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial)

A. INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement
TELEMARKETING SERVICES

003

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 19 / 2013

Transaction ID : SB21B.143170

Amount of Each Disbursement this Period

34681.00

Full Name (Last, First, Middle Initial)

B. INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement
TELEMARKETING SERVICES

003

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 04 / 2013

Transaction ID : SB21B.143171

Amount of Each Disbursement this Period

92153.87

Full Name (Last, First, Middle Initial)

C. INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement
TELEMARKETING SERVICES

003

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 13 / 2013

Transaction ID : SB21B.143172

Amount of Each Disbursement this Period

30563.54

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

157398.41

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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial)

A. MACKENZIE & COMPANY

Mailing Address 2776 S ARLINGTON MILL DRIVE #806

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement
CONSULTING - COMPLIANCE

001

Category/
Type

Candidate Name

CONSERVATIVE MAJORITY FUND

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
0	7				1	5		2	0	1	3		

Transaction ID : SB21B.142883

Amount of Each Disbursement this Period

3	7	5	.	0	0
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. MACKENZIE & COMPANY

Mailing Address 2776 S ARLINGTON MILL DRIVE #806

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement
CONSULTING - COMPLIANCE

001

Category/
Type

Candidate Name

CONSERVATIVE MAJORITY FUND

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
0	8				2	0		2	0	1	3		

Transaction ID : SB21B.142884

Amount of Each Disbursement this Period

3	7	5	.	0	0
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. MACKENZIE & COMPANY

Mailing Address 2776 S ARLINGTON MILL DRIVE #806

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement
CONSULTING - COMPLIANCE

001

Category/
Type

Candidate Name

CONSERVATIVE MAJORITY FUND

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
0	9				2	0		2	0	1	3		

Transaction ID : SB21B.142885

Amount of Each Disbursement this Period

3	7	5	.	0	0
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[MEMO ITEM]

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

0	0	0
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TOTAL This Period (last page this line number only)..... ▶

0	0	0
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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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial)

A. MACKENZIE & COMPANY

Mailing Address 2776 S ARLINGTON MILL DRIVE #806

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement
CONSULTING - COMPLIANCE

001

Candidate Name

CONSERVATIVE MAJORITY FUND

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 Y Y
10 / 18 / 2013

Transaction ID : **SB21B.142886**

Amount of Each Disbursement this Period

3750.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. MACKENZIE & COMPANY

Mailing Address 2776 S ARLINGTON MILL DRIVE #806

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement
CONSULTING - COMPLIANCE

001

Candidate Name

CONSERVATIVE MAJORITY FUND

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 Y Y
11 / 15 / 2013

Transaction ID : **SB21B.142887**

Amount of Each Disbursement this Period

3750.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. MACKENZIE & COMPANY

Mailing Address 2776 S ARLINGTON MILL DRIVE #806

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement
CONSULTING - COMPLIANCE

001

Candidate Name

CONSERVATIVE MAJORITY FUND

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 Y Y
12 / 10 / 2013

Transaction ID : **SB21B.143197**

Amount of Each Disbursement this Period

3000.00

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

3000.00

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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial)

A. MACKENZIE & COMPANY

Mailing Address 2776 S ARLINGTON MILL DRIVE #806

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement
CONSULTING - COMPLIANCE

001

Category/
Type

Candidate Name

CONSERVATIVE MAJORITY FUND

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
12 / 13 / 2013

Transaction ID : **SB21B.142888**

Amount of Each Disbursement this Period

3750.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. RAPID RESPONSE TELEVISION LLC

Mailing Address 4850 WRIGHT RD
SUITE 168

City STAFFORD State TX Zip Code 77477

Purpose of Disbursement
MEDIA PLACEMENT

003

Category/
Type

Candidate Name

CONSERVATIVE MAJORITY FUND

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
08 / 05 / 2013

Transaction ID : **SB21B.143149**

Amount of Each Disbursement this Period

101597.57

Full Name (Last, First, Middle Initial)

C. RAPID RESPONSE TELEVISION LLC

Mailing Address 4850 WRIGHT RD
SUITE 168

City STAFFORD State TX Zip Code 77477

Purpose of Disbursement
MEDIA PLACEMENT

003

Category/
Type

Candidate Name

CONSERVATIVE MAJORITY FUND

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
08 / 14 / 2013

Transaction ID : **SB21B.143150**

Amount of Each Disbursement this Period

26188.58

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

127786.15

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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial)

A. RAPID RESPONSE TELEVISION LLC

Mailing Address 4850 WRIGHT RD
SUITE 168

City STAFFORD State TX Zip Code 77477

Purpose of Disbursement
MEDIA PLACEMENT

003

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 24 / 2013

Transaction ID : **SB21B.143151**

Amount of Each Disbursement this Period

68136.70

Full Name (Last, First, Middle Initial)

B. M E SEILER

Mailing Address STATE RT 7
NUM 683

City WINCHESTER State VA Zip Code 22601

Purpose of Disbursement
CAGING & DATA ENTRY SERVICES

001

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 12 / 2013

Transaction ID : **SB21B.143184**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. STRATEGIC CAMPAIGN GROUP

Mailing Address 4600 NORTH FAIRFAX DRIVE
SUITE 802

City ARLINGTON State VA Zip Code 22203

Purpose of Disbursement
CONSULTING - PAC MANAGEMENT

001

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 15 / 2013

Transaction ID : **SB21B.142890**

Amount of Each Disbursement this Period

3750.00

[MEMO ITEM]

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

69136.70

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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial)

A. STRATEGIC CAMPAIGN GROUP

Mailing Address 4600 NORTH FAIRFAX DRIVE
SUITE 802

City ARLINGTON State VA Zip Code 22203

Purpose of Disbursement
CONSULTING - PAC MANAGEMENT

001

Category/
Type

Candidate Name

CONSERVATIVE MAJORITY FUND

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
08 / 20 / 2013

Transaction ID : **SB21B.142892**

Amount of Each Disbursement this Period

3750.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. STRATEGIC CAMPAIGN GROUP

Mailing Address 4600 NORTH FAIRFAX DRIVE
SUITE 802

City ARLINGTON State VA Zip Code 22203

Purpose of Disbursement
COPY WRITING, CREATIVE & MANAGEMENT CONSULTING

001

Category/
Type

Candidate Name

CONSERVATIVE MAJORITY FUND

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 / 03 / 2013

Transaction ID : **SB21B.147750**

Amount of Each Disbursement this Period

21000.00

Full Name (Last, First, Middle Initial)

C. STRATEGIC CAMPAIGN GROUP

Mailing Address 4600 NORTH FAIRFAX DRIVE
SUITE 802

City ARLINGTON State VA Zip Code 22203

Purpose of Disbursement
TELETOWN HALL - PAC DONOR FOLLOW-UP

003

Category/
Type

Candidate Name

CONSERVATIVE MAJORITY FUND

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 / 13 / 2013

Transaction ID : **SB21B.147752**

Amount of Each Disbursement this Period

3700.00

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

24700.00

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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial)

A. STRATEGIC CAMPAIGN GROUP

Mailing Address 4600 NORTH FAIRFAX DRIVE
SUITE 802

City ARLINGTON State VA Zip Code 22203

Purpose of Disbursement
CONSULTING - PAC MANAGEMENT

001

Candidate Name

CONSERVATIVE MAJORITY FUND

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 / 20 / 2013

Transaction ID : **SB21B.142893**

Amount of Each Disbursement this Period

3750.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. STRATEGIC CAMPAIGN GROUP

Mailing Address 4600 NORTH FAIRFAX DRIVE
SUITE 802

City ARLINGTON State VA Zip Code 22203

Purpose of Disbursement
CONSULTING - PAC MANAGEMENT

001

Candidate Name

CONSERVATIVE MAJORITY FUND

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
10 / 18 / 2013

Transaction ID : **SB21B.142894**

Amount of Each Disbursement this Period

3750.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. STRATEGIC CAMPAIGN GROUP

Mailing Address 4600 NORTH FAIRFAX DRIVE
SUITE 802

City ARLINGTON State VA Zip Code 22203

Purpose of Disbursement
CONSULTING - PAC MANAGEMENT

001

Candidate Name

CONSERVATIVE MAJORITY FUND

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
11 / 15 / 2013

Transaction ID : **SB21B.142895**

Amount of Each Disbursement this Period

3750.00

[MEMO ITEM]

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

0.00

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)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial)

A. STRATEGIC CAMPAIGN GROUP

Mailing Address 4600 NORTH FAIRFAX DRIVE
SUITE 802

City ARLINGTON State VA Zip Code 22203

Purpose of Disbursement
CONSULTING - PAC MANAGEMENT

001

Candidate Name

CONSERVATIVE MAJORITY FUND

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 Y Y
12 / 13 / 2013

Transaction ID : **SB21B.142896**

Amount of Each Disbursement this Period

3750.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. TAKE 2 DIRECT LLC

Mailing Address 312 MARGUERITE AVE

City CORONA DEL MAR State CA Zip Code 92625

Purpose of Disbursement
MEDIA PRODUCTION

003

Candidate Name

CONSERVATIVE MAJORITY FUND

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 Y Y
07 / 02 / 2013

Transaction ID : **SB21B.143152**

Amount of Each Disbursement this Period

560.70

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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

560.70

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

1219646.76

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial)

A. MRS FUMIE BOYCE 985

Mailing Address 432 INCELCO LOOP SE
APT 157

City OLYMPIA State WA Zip Code 98503

Purpose of Disbursement
CONTRIBUTION REFUND

010

Candidate Name

CONSERVATIVE MAJORITY FUND

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
12	/	06	/	2013

Transaction ID : SB28A.143176

Amount of Each Disbursement this Period

500.00

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)..... ▶

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

500.00

500.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial)

A. IMAGINE IT

Mailing Address 1052 LYNN ROMERO DR

City State Zip Code
BREAUX BRIDGE LA 70517

Purpose of Disbursement
WEB-BASED VOTER CONTACT

006

Candidate Name

CONSERVATIVE MAJORITY FUND

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
10 / 24 / 2013

Transaction ID : SB29.143192

Amount of Each Disbursement this Period

3950.00

Full Name (Last, First, Middle Initial)

B. LYNNBURN COMMUNICATIONS

Mailing Address 39 CEDARWOOD LN

City State Zip Code
CHADDS FORD PA 19317

Purpose of Disbursement
GOTV PHONE CALLS

006

Candidate Name

CONSERVATIVE MAJORITY FUND

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
10 / 24 / 2013

Transaction ID : SB29.143196

Amount of Each Disbursement this Period

7530.00

Full Name (Last, First, Middle Initial)

C. STRATEGIC CAMPAIGN GROUP

Mailing Address 4600 NORTH FAIRFAX DRIVE
SUITE 802

City State Zip Code
ARLINGTON VA 22203

Purpose of Disbursement
VOTER CALLS

006

Candidate Name

CONSERVATIVE MAJORITY FUND

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
10 / 25 / 2013

Transaction ID : SB29.143201

Amount of Each Disbursement this Period

4975.00

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

16455.00

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

16455.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 724 OF 724
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor INFOCISION MANAGEMENT CORP	Nature of Debt (Purpose): VOTER CONTACT & SOLICITATION CALLS
Mailing Address 325 SPRINGSIDE DRIVE	
City State Zip Code AKRON OH 44333	

Outstanding Balance Beginning This Period <input type="text" value="128876.65"/>	Transaction ID : SD10.4126	
Amount Incurred This Period <input type="text" value="819560.08"/>	Payment This Period <input type="text" value="862215.23"/>	Outstanding Balance at Close of This Period <input type="text" value="86221.50"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="86221.50"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="86221.50"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="86221.50"/>