



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**HOUSE CONSERVATIVES 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="2015"/>	<input type="text" value="93771.65"/>	<input type="text" value="93771.65"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="72978.91"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="21071.63"/>	<input type="text" value="180403.14"/>
(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="94050.54"/>	<input type="text" value="274174.79"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="12079.98"/>	<input type="text" value="192204.23"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="81970.56"/>	<input type="text" value="81970.56"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="9723.07"/>	

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

**For further information contact:**

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

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

DETAILED SUMMARY PAGE  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

HOUSE CONSERVATIVES FUND

Report Covering the Period: From: 09 / 01 / 2015 To: 09 / 30 / 2015

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).....	1300.00	31500.00
(ii) Unitemized .....	125.00	9543.51
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	1425.00	41043.51
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	15000.00	124500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	16425.00	165543.51
12. Transfers From Affiliated/Other Party Committees.....	4646.63	4646.63
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	10213.00
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))..... ▶	21071.63	180403.14
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	21071.63	180403.14

**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 .....	12079.98	192204.23
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	12079.98	192204.23
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 .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	12079.98	192204.23
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12079.98	192204.23

**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) .....	16425.00	165543.51
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	16425.00	165543.51
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	12079.98	192204.23
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	10213.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	12079.98	181991.23

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

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

FOR LINE NUMBER: PAGE 6 OF 12  
(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)  
**HOUSE CONSERVATIVES FUND**

**A. Mr. Kenneth Johnson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2165 Stopper Dr  
 City Montoursville State PA Zip Code 17754  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 18 / 2015  
**Transaction ID : SA11AI.82293**  
 Amount of Each Receipt this Period 300.00

**B. Erle A. Nye**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1211 Creek Forest Dr.  
 City Dallas State TX Zip Code 75230  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer EN Consulting Occupation Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 11 / 2015  
**Transaction ID : SA11AI.82303**  
 Amount of Each Receipt this Period 1000.00

**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  
 Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 12
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**HOUSE CONSERVATIVES FUND**

**A. HEALTH CARE SERVICE CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)  
Mailing Address 300 E. RANDOLPH  
LEGAL DEPT.

City CHICAGO State IL Zip Code 60601

FEC ID number of contributing federal political committee. **C** C00199711

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
09 / 11 / 2015  
**Transaction ID : SA11C.82305**

Amount of Each Receipt this Period  
5000.00

**B. METLIFE INC. EMPLOYEES' POLITICAL PARTICIPATION FUND A**

Full Name (Last, First, Middle Initial)  
Mailing Address 1095 AVENUE OF THE AMERICAS

City NEW YORK State NY Zip Code 10036

FEC ID number of contributing federal political committee. **C** C00040923

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
09 / 29 / 2015  
**Transaction ID : SA11C.82302**

Amount of Each Receipt this Period  
5000.00

**C. WESTMORELAND FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 458

City Sharpsburg State GA Zip Code 30277

FEC ID number of contributing federal political committee. **C** C00387126

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
09 / 11 / 2015  
**Transaction ID : SA11C.82306**

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15000.00
<b>TOTAL</b> This Period (last page this line number only).....	15000.00

**SCHEDULE A (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 12
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**HOUSE CONSERVATIVES FUND**

**A. ROGER FOR CONGRESS VICTORY FUND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1005 CONGRESS AVE STE 910  
 City AUSTIN State TX Zip Code 78701  
 FEC ID number of contributing federal political committee. **C** C00583435  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4646.63

Date of Receipt 09 / 18 / 2015  
**Transaction ID : SA12.82307**  
 Amount of Each Receipt this Period 4646.63  
 Distribution of Net JFC Proceeds-See Memo

**B. Trevor L. Ahlberg**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4725 Windsor Ridge Dr.  
 City Irving State TX Zip Code 75038  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation Cottonwood Financial CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 18 / 2015  
**Transaction ID : SA12.82307.0**  
 Amount of Each Receipt this Period 5000.00  
 Roger for Congress Victory Fund-Transfer Memo  
**[MEMO ITEM]**

**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  
 Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4646.63
<b>TOTAL</b> This Period (last page this line number only).....	4646.63

**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)  
**HOUSE CONSERVATIVES FUND**

Full Name (Last, First, Middle Initial)

**A. Authorize.net**

Mailing Address PO Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement  
Merchant Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 02 / 2015

**Transaction ID : SB21B.82296**

Amount of Each Disbursement this Period

25.55

Full Name (Last, First, Middle Initial)

**B. BB&T**

Mailing Address 14785 Forest Rd.

City Forest State VA Zip Code 24551

Purpose of Disbursement  
Merchant Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2015

**Transaction ID : SB21B.82297**

Amount of Each Disbursement this Period

51.43

Full Name (Last, First, Middle Initial)

**C. The Pipes Company**

Mailing Address 3605 Kimberly

City Fort Worth State TX Zip Code 76133

Purpose of Disbursement  
Communications Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 14 / 2015

**Transaction ID : SB21B.82314**

Amount of Each Disbursement this Period

12000.00

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

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

12076.98

**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)  
**HOUSE CONSERVATIVES FUND**

Full Name (Last, First, Middle Initial)

**A. Wells Fargo**

Mailing Address P.O. Box 563966

City Charlotte State NC Zip Code 28256

Purpose of Disbursement  
Bank Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 09 / 2015

**Transaction ID : SB21B.82300**

Amount of Each Disbursement this Period

3.00

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

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

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

3.00

12079.98

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 11 OF 12
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**HOUSE CONSERVATIVES FUND**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Lilly &amp; Company</b>	Nature of Debt (Purpose): Fundraising Consulting
Mailing Address 1005 Congress Ave., Ste. 910	
City State Zip Code Austin TX 78701	

Outstanding Balance Beginning This Period 5000.00	<b>Transaction ID : SD10.82235</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Squire Patton Boggs</b>	Nature of Debt (Purpose): Legal Fees
Mailing Address 2550 M Street, NW	
City State Zip Code Washington DC 20037	

Outstanding Balance Beginning This Period 4223.07	<b>Transaction ID : SD10.82236</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 4223.07

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>The Lukens Company</b>	Nature of Debt (Purpose): Direct Mail
Mailing Address 2800 Shirlington Rd.	
City State Zip Code Arlington VA 22206	

Outstanding Balance Beginning This Period 500.00	<b>Transaction ID : SD10.82232</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 500.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	9723.07
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 12 OF 12
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**HOUSE CONSERVATIVES FUND**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>The Pipes Company</b>	Nature of Debt (Purpose): Communications Consulting
Mailing Address 3605 Kimberly	
City State Zip Code Fort Worth TX 76133	

Outstanding Balance Beginning This Period <input type="text" value="6000.00"/>	<b>Transaction ID : SD10.82233</b>	
Amount Incurred This Period <input type="text" value="6000.00"/>	Payment This Period <input type="text" value="12000.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

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"/>
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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"/>
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1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text" value="9723.07"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="9723.07"/>