24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

SCHEDULE E)	PAGE 1 OF 2 FOR SE OF FORM 24/48			
	FEC IDENTIFICATION NUMBER ▼			
SENATE CONSERVATIVES FUND	C C00448696			
Check If 24-hour report X 48-hour report New report Amends report filed on				
Full Name (Last, First, Middle Initial) of Payee				
ASG Marketing	M / D D / Y Y Y Y			
Mailing Address 1600 Amphitheatre Pkwy	12 19 2013			
Amoun	nt			
City State Zip Code Mountain View CA 94043	10403.00			
Transac of Evenenditure	ction ID : SE.5009 nt: House State: LA			
IE-Maness-Email List Rental Category/ Type 003	Senate District: 00			
Name of Federal Candidate Supported or Opposed by Expenditure:	President			
ROBERT L COLONEL MANESS Check One:	Support Oppose			
0.00	nt For: Primary General ther (specify)			
Full Name (Last, First, Middle Initial) of Payee Date				
Mailing Address PO Box 388	12 07 2013			
Amoun	nt			
City State Zip Code ALEXANDRIA VA 22313	309.20			
Transac	ction ID : SE.5010 ht: House State: LA			
IE-Maness-Online Processing Category/ Type 003	Senate District: 00			
Name of Federal Candidate Supported or Opposed by Expenditure:	President ———			
ROBERT L COLONEL MANESS Check One:	Support Oppose			
0 00 2014	nt For: Primary General her (specify)			
(a) SUBTOTAL of Itemized Independent Expenditures				
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures	7 7 7			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Paul Kilgore [Electronically Filed] Date 12	20 2013			
Signature Date 12	20 2013			

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

S	CHEDULE E)		PAGE 2 OF 2 FOR SE OF FORM 24/48	
	AME OF COMMITTE (In Full)		FEC IDENTIFICATION NUMBER ▼	
S	SENATE CONSERVATIVES FUND		C C00448696	
Check If 24-hour report				
	Full Name (Last, First, Middle Initial) of Payee	Date		
	SENATE CONSERVATIVES FUND		M / D D / Y Y Y Y	
	Mailing Address PO Box 388		12 14 2013	
		Amour	nt	
	City State Zip Code		364.10	
	ALEXANDRIA VA 22313	Transac	ction ID : SE.5011	
	Purpose of Expenditure IE-Maness-Online Processing Category/ 003	Office Sough		
	Туре		Senate District: 00 President	
	Name of Federal Candidate Supported or Opposed by Expenditure: ROBERT L COLONEL MANESS	Check One:	Support Oppose	
	ROBERT E GOLONEE IVIANESS			
	Calendar Year-To-Date Per Election 0.00	2014	nt For: Primary General	
	for Office Sought	Otl	her (specify)	
	Full Name (Last, First, Middle Initial) of Payee	Date		
		М	M / D D / Y Y Y Y	
	Mailing Address			
		Amour	nt	
	City State Zip Code			
	Durages of Evpanditure	Office Sough	nt: House State:	
	Purpose of Expenditure Category/ Type	Omoo Cougi	Senate District:	
	Name of Federal Candidate Supported or Opposed by Expenditure:		President	
		Check One:	Support Oppose	
	Calendar Year-To-Date Per Election	Disbursemen	nt For: Primary General	
	for Office Sought	Otl	her (specify)	
	(a) SUBTOTAL of Itemized Independent Expenditures		364.10	
(a) SUBTOTAL of hernized independent expenditures				
(b) SUBTOTAL of Unitemized Independent Expenditures				
			7 1 7 1 7	
	(c) TOTAL Independent Expenditures	•	11076.30	
			7 7 7	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert				
	with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
F,				
	Paul Kilgore	M = M /		
	[Electronically Filed] Date Signature	12	20 2013	