



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Conservative Solutions PAC**

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="86.00"/>	<input type="text" value="86.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="15950315.87"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="14392146.00"/>	<input type="text" value="30449901.00"/>
(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="30342461.87"/>	<input type="text" value="30449987.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="16409209.86"/>	<input type="text" value="16516734.99"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="13933252.01"/>	<input type="text" value="13933252.01"/>
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="19312.50"/>	

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 Solutions PAC

Report Covering the Period: From: 07 / 01 / 2015 To: 12 / 31 / 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).....	14085850.00	30143450.00
(ii) Unitemized .....	1296.00	1451.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	14087146.00	30144901.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	305000.00	305000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	14392146.00	30449901.00
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))..... ▶	14392146.00	30449901.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	14392146.00	30449901.00

**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 .....	9090743.78	9198268.91
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	9090743.78	9198268.91
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) .....	7288466.08	7288466.08
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 .....	30000.00	30000.00
(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)).....	30000.00	30000.00
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)) ..	16409209.86	16516734.99
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	16409209.86	16516734.99

**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) .....	14392146.00	30449901.00
34. Total Contribution Refunds (from Line 28(d)) .....	30000.00	30000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	14362146.00	30419901.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	9090743.78	9198268.91
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	9090743.78	9198268.91

**SCHEDULE A (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 107
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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 Solutions PAC**

Full Name (Last, First, Middle Initial) <b>A. Access Industries, Inc.</b>		Date of Receipt 12 / 08 / 2015 <b>Transaction ID : SA11AI.4748</b>
Mailing Address 730 5th Avenue, #20		Amount of Each Receipt this Period 250000.00
City New York	State NY	Zip Code 10019
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 ▼ 250000.00	

Full Name (Last, First, Middle Initial) <b>B. Sebastian Aleksander</b>		Date of Receipt 12 / 11 / 2015 <b>Transaction ID : SA11AI.4786</b>
Mailing Address 3583 Mosey Creek Lane		Amount of Each Receipt this Period 5000.00
City Tallahassee	State FL	Zip Code 32311
FEC ID number of contributing federal political committee. C	Name of Employer The Aleksander Group	Occupation owner
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C. Cesar L. Alvarez</b>		Date of Receipt 11 / 11 / 2015 <b>Transaction ID : SA11AI.4644</b>
Mailing Address 333 S.E. 2nd Avenue, 44th Floor		Amount of Each Receipt this Period 10000.00
City Miami	State FL	Zip Code 33131
FEC ID number of contributing federal political committee. C	Name of Employer Greenberg Traurig	Occupation chairman
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	265000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (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 107
	<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 Solutions PAC**

**A. Cliff Asness**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 750 3rd Avenue  
 FL 11  
 City New York State NY Zip Code 10017  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer AQR Capital Management Occupation founder  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2015  
**Transaction ID : SA11AI.4887**  
 Amount of Each Receipt this Period  
**1000000.00**

**B. Brian Ballard**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7445 Hartland Circle  
 City Tallahassee State FL Zip Code 32312  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Ballard Partners Occupation government relations  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **25000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 07 / 2015  
**Transaction ID : SA11AI.4592**  
 Amount of Each Receipt this Period  
**25000.00**

**C. Clayton Barker**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4779 Sedberry Hill Court, S.E.  
 City Atlanta State GA Zip Code 30339  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Law Offices of Robert Barker 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  
 12 / 28 / 2015  
**Transaction ID : SA11AI.4863**  
 Amount of Each Receipt this Period  
**250.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1025250.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (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 107
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Conservative Solutions PAC**

**A. Robert F. Bartholomew**  
Full Name (Last, First, Middle Initial)

Mailing Address 23 Tide Watch

City Newport Coast State CA Zip Code 92657

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

Name of Employer Windjammer Capital Investors Occupation executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 14 / 2015

**Transaction ID : SA11AI.4764**

Amount of Each Receipt this Period  
5400.00

**B. BCM Consulting, Inc.**  
Full Name (Last, First, Middle Initial)

Mailing Address 300 S. Orange Avenue, #1565

City Orlando State FL Zip Code 32801

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 16 / 2015

**Transaction ID : SA11AI.4459**

Amount of Each Receipt this Period  
2700.00

**C. Bruce R. Berkowitz**  
Full Name (Last, First, Middle Initial)

Mailing Address 14 Tahiti Beach Island Road

City Coral Gables State FL Zip Code 33143

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

Name of Employer Fairholme Capital Management Occupation investment manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 12 / 2015

**Transaction ID : SA11AI.4642**

Amount of Each Receipt this Period  
250000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	258100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 107
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Conservative Solutions PAC**

**A. Bruce Boggs**  
Full Name (Last, First, Middle Initial)

Mailing Address 1 Spruce Meadow Court

City Wilton State CT Zip Code 06897

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 ▼ 2500.00

Date of Receipt 08 / 25 / 2015  
**Transaction ID : SA11AI.4420**

Amount of Each Receipt this Period 2500.00

**B. Norman Braman**  
Full Name (Last, First, Middle Initial)

Mailing Address 2060 Biscayne Blvd., 2nd Floor

City Miami State FL Zip Code 33137

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

Name of Employer Braman Motors, Inc. Occupation auto dealer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 6000000.00

Date of Receipt 12 / 23 / 2015  
**Transaction ID : SA11AI.4824**

Amount of Each Receipt this Period 1000000.00

**C. August A. Busch III**  
Full Name (Last, First, Middle Initial)

Mailing Address 1 Mid Rivers Mall Drive

City St. Peters State MO Zip Code 63376

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

Name of Employer n/a Occupation retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 44600.00

Date of Receipt 07 / 06 / 2015  
**Transaction ID : SA11AI.4360**

Amount of Each Receipt this Period 44600.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1047100.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 107
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Conservative Solutions PAC**

Full Name (Last, First, Middle Initial)  
**A. August A. Busch III**

Mailing Address 1 Mid Rivers Mall Drive

City State Zip Code  
St. Peters MO 63376

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

Name of Employer Occupation  
n/a retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
49600.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 26 / 2015

**Transaction ID : SA11AI.4838**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**B. C & H Agency, Inc.**

Mailing Address 783 N. Riverview Drive

City State Zip Code  
Totowa NJ 07512

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
8000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 10 / 2015

**Transaction ID : SA11AI.4445**

Amount of Each Receipt this Period  
8000.00

Full Name (Last, First, Middle Initial)  
**C. Susan A. Carusi**

Mailing Address P.O. Box 203

City State Zip Code  
Mill Neck NY 11765

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 ▼  
5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
11 / 06 / 2015

**Transaction ID : SA11AI.4578**

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	18000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 107
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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 Solutions PAC**

Full Name (Last, First, Middle Initial) <b>A. Fleur Cates</b>		Date of Receipt
Mailing Address 817 Fifth Avenue, 10th Floor		<input type="text" value="11"/> / <input type="text" value="10"/> / <input type="text" value="2015"/>
City	State	Zip Code
New York	NY	10065
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.4584</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25000.00"/>
Name of Employer	Occupation	
n/a	retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="25000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Central Med Distribution, Inc.</b>		Date of Receipt
Mailing Address 6100 Hollywood Blvd., #407		<input type="text" value="11"/> / <input type="text" value="18"/> / <input type="text" value="2015"/>
City	State	Zip Code
Hollywood	FL	33024
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.4681</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="10000.00"/>
Name of Employer	Occupation	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="10000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Arthur B. Choate</b>		Date of Receipt
Mailing Address 1390 S. Dixie Highway, #2221		<input type="text" value="10"/> / <input type="text" value="21"/> / <input type="text" value="2015"/>
City	State	Zip Code
Miami	FL	33146
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.4515</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>
Name of Employer	Occupation	
Artmarina, Inc.	owner	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="10000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="40000.00"/>
<b>TOTAL</b> 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 12 OF 107
	<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 Solutions PAC**

**A. Chris Cline**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3801 PGA Blvd., #903  
 City State Zip Code  
 Palm Beach Gardens FL 33410  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 The Cline Group owner  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 28 / 2015  
**Transaction ID : SA11AI.4472**  
 Amount of Each Receipt this Period  
 500000.00

**B. Coastal QSR, LLC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1340 Hamlet Avenue  
 City State Zip Code  
 Clearwater FL 33756  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 10000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 04 / 2015  
**Transaction ID : SA11AI.4733**  
 Amount of Each Receipt this Period  
 10000.00

**C. Collum's Sawmill, LLC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P. O. Box 535  
 City State Zip Code  
 Allendale SC 29810  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 50000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 29 / 2015  
**Transaction ID : SA11AI.4862**  
 Amount of Each Receipt this Period  
 50000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	560000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (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 107
	<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 Solutions PAC**

**A. John Corcoran**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 790 Willard Street, #210  
 City Quincy State MA Zip Code 02169  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Corcoran Management Occupation attorney  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **6000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2015  
**Transaction ID : SA11AI.4557**  
 Amount of Each Receipt this Period  
**5000.00**

**B. Michael C. Corcoran**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7746 Still Lakes Drive  
 City Odessa State FL Zip Code 33556  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Corcoran & Johnston Occupation executive  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **50000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2015  
**Transaction ID : SA11AI.4483**  
 Amount of Each Receipt this Period  
**50000.00**

**C. Mercy Cordero**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. Box 546  
 City Zephyr Cove State NV Zip Code 89448  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer n/a Occupation retired  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **10000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 21 / 2015  
**Transaction ID : SA11AI.4802**  
 Amount of Each Receipt this Period  
**10000.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>65000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 107
	<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 Solutions PAC**

**A. Harlan Crow**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3819 Maple Avenue  
 City Dallas State TX Zip Code 75219  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Crow Holdings Occupation investor  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 24 / 2015  
**Transaction ID : SA11AI.4435**  
 Amount of Each Receipt this Period  
 100000.00  
 Aggregate Year-to-Date ▼  
 100000.00

**B. Sylvie Crum**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3 W. Lane  
 City Houston State TX Zip Code 77019  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer n/a Occupation retired  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 14 / 2015  
**Transaction ID : SA11AI.4648**  
 Amount of Each Receipt this Period  
 10000.00  
 Aggregate Year-to-Date ▼  
 10000.00

**C. John Davies**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. Box 482  
 City Red Bank State NJ Zip Code 07701  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Stavola Management Co. Occupation manager  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 10 / 2015  
**Transaction ID : SA11AI.4405**  
 Amount of Each Receipt this Period  
 1500.00  
 Aggregate Year-to-Date ▼  
 1500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	111500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 107
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Conservative Solutions PAC**

Full Name (Last, First, Middle Initial) <b>A. Delray Recovery Center, LLC</b>		Date of Receipt
Mailing Address 140 N.E. 4th Avenue, #D		<input type="text" value="11"/> / <input type="text" value="03"/> / <input type="text" value="2015"/>
City	State	Zip Code
Delray Beach	FL	33483
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.4590</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="20000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="20000.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Doctors Medical Rentals, Corp.</b>		Date of Receipt
Mailing Address P.O. Box 55-7305		<input type="text" value="11"/> / <input type="text" value="14"/> / <input type="text" value="2015"/>
City	State	Zip Code
Miami	FL	33255
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.4659</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Christopher Dorworth</b>		Date of Receipt
Mailing Address 1520 Whitstable Court		<input type="text" value="12"/> / <input type="text" value="11"/> / <input type="text" value="2015"/>
City	State	Zip Code
Heathrow	FL	32746
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.4790</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Ballard Partners	government affairs	<input type="text" value="7300.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="7300.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="27550.00"/>
<b>TOTAL</b> 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 16 OF 107
	<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 Solutions PAC**

Full Name (Last, First, Middle Initial) <b>A. Susan L. Enderly</b>		Date of Receipt
Mailing Address 6 Lauren Court		<input type="text" value="08"/> / <input type="text" value="13"/> / <input type="text" value="2015"/>
City	State	Zip Code
Wayne	NJ	07470
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.4410
Name of Employer	Occupation	Amount of Each Receipt this Period
self-employed	govt. relations	<input type="text" value="500.00"/>
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) <b>B. Irwin J. Fayne</b>		Date of Receipt
Mailing Address 2624 N.E. 35th Drive		<input type="text" value="11"/> / <input type="text" value="14"/> / <input type="text" value="2015"/>
City	State	Zip Code
Fort Lauderdale	FL	33308
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.4665
Name of Employer	Occupation	Amount of Each Receipt this Period
Holland & Knight LLP	attorney	<input type="text" value="500.00"/>
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) <b>C. Mark Fisher</b>		Date of Receipt
Mailing Address 301 W. 41st Street, #300		<input type="text" value="11"/> / <input type="text" value="12"/> / <input type="text" value="2015"/>
City	State	Zip Code
Miami Beach	FL	33140
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.4640
Name of Employer	Occupation	Amount of Each Receipt this Period
MBF Clearing Corp.	c.e.o.	<input type="text" value="10000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="10000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="11000.00"/>
<b>TOTAL</b> 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 17 OF 107
	<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 Solutions PAC**

**A. Juan C. Flores**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9122 Eagles Ridge Drive  
 City Tallahassee State FL Zip Code 32312  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer AT&T Occupation govt. relations  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **2000.00**

Date of Receipt **08 / 10 / 2015**  
**Transaction ID : SA11AI.4403**  
 Amount of Each Receipt this Period **2000.00**

**B. Florida Bells, LLC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1340 Hamlet Avenue  
 City Clearwater State FL Zip Code 33756  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **10000.00**

Date of Receipt **12 / 04 / 2015**  
**Transaction ID : SA11AI.4735**  
 Amount of Each Receipt this Period **10000.00**

**C. Florida Crystals Corporation**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1 N. Clematis Street Suite 200  
 City West Palm Beach State FL Zip Code 33401  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **350000.00**

Date of Receipt **12 / 30 / 2015**  
**Transaction ID : SA11AI.4886**  
 Amount of Each Receipt this Period **250000.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>262000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 107
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Conservative Solutions PAC**

Full Name (Last, First, Middle Initial) <b>A. FNA Associates, Inc.</b>		Date of Receipt
Mailing Address 670 Bergen Blvd.		<input type="text" value="11"/> / <input type="text" value="03"/> / <input type="text" value="2015"/>
City	State	Zip Code
Ridgefield	NJ	07657
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.4588</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1000.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Mathew Forrest</b>		Date of Receipt
Mailing Address 244 Alhambra Place		<input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2015"/>
City	State	Zip Code
West Palm Beach	FL	33405
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.4609</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Ballard Partners	govt. relations	<input type="text" value="500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="500.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Christopher Fussner</b>		Date of Receipt
Mailing Address 1860 N. Spirit Dance Road, #3103		<input type="text" value="09"/> / <input type="text" value="10"/> / <input type="text" value="2015"/>
City	State	Zip Code
Jackson	WY	83001
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.4443</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Trans-Tec USA	president	<input type="text" value="50000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="50000.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="51500.00"/>
<b>TOTAL</b> 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 19 OF 107  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Conservative Solutions PAC**

Full Name (Last, First, Middle Initial)  
**A. Christopher Fussner**

Mailing Address 1860 N. Spirit Dance Road, #3103

City Jackson State WY Zip Code 83001

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

Name of Employer Trans-Tec USA Occupation president

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
75000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2015  
**Transaction ID : SA11AI.4799**

Amount of Each Receipt this Period  
25000.00

Full Name (Last, First, Middle Initial)  
**B. G-5 Trading, Inc.**

Mailing Address 6100 Hollywood Blvd., #407

City Hollywood State FL Zip Code 33024

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 18 / 2015  
**Transaction ID : SA11AI.4683**

Amount of Each Receipt this Period  
10000.00

Full Name (Last, First, Middle Initial)  
**C. Stanley Gaines**

Mailing Address 2 N. Breakers Row, #N35

City Palm Beach State FL Zip Code 33480

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

Name of Employer n/a Occupation retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 02 / 2015  
**Transaction ID : SA11AI.4490**

Amount of Each Receipt this Period  
100000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 135000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 107
	<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 Solutions PAC**

**A. Russell W. Galbut**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2200 Biscayne Blvd.  
 City Miami State FL Zip Code 33137  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer self-employed Occupation developer  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **10000.00**

Date of Receipt  
 11 / 14 / 2015  
**Transaction ID : SA11AI.4661**  
 Amount of Each Receipt this Period  
**10000.00**

**B. GDKN Corporation**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1779 N. University Drive, #102  
 City Pembroke Pines State FL Zip Code 33024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **500.00**

Date of Receipt  
 11 / 07 / 2015  
**Transaction ID : SA11AI.4603**  
 Amount of Each Receipt this Period  
**500.00**

**C. Geo Corrections Holdings, Inc.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 621 N.W. 53rd Street, #700  
 City Boca Raton State FL Zip Code 33487  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **110000.00**

Date of Receipt  
 11 / 17 / 2015  
**Transaction ID : SA11AI.4657**  
 Amount of Each Receipt this Period  
**10000.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>20500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 107
	<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 Solutions PAC**

Full Name (Last, First, Middle Initial)  
**A. Jose Goyanes**

Mailing Address 4 S.E. 1st Street

City Miami State FL Zip Code 33131

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

Name of Employer self-employed Occupation sales

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 13 / 2015

Transaction ID : **SA11AI.4646**

Amount of Each Receipt this Period  
10000.00

Full Name (Last, First, Middle Initial)  
**B. Grand Warehouse & Shipping, Inc.**

Mailing Address 6100 Hollywood Blvd., #407

City Hollywood State FL Zip Code 33024

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 18 / 2015

Transaction ID : **SA11AI.4679**

Amount of Each Receipt this Period  
10000.00

Full Name (Last, First, Middle Initial)  
**C. Green Swan, LLC**

Mailing Address 222 S. Pennsylvania Avenue, #200

City Winter Park State FL Zip Code 32789

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 14 / 2015

Transaction ID : **SA11AI.4671**

Amount of Each Receipt this Period  
2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	22500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (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 107
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Conservative Solutions PAC**

**A. Kenneth C. Griffin**  
Full Name (Last, First, Middle Initial)

Mailing Address 131 S. Dearborn Street

City Chicago State IL Zip Code 60603

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

Name of Employer Citadel, LLC Occupation founder and c.e.o.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2600000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 14 / 2015

**Transaction ID : SA11AI.4768**

Amount of Each Receipt this Period  
 2500000.00

**B. Susan L. Groff**  
Full Name (Last, First, Middle Initial)

Mailing Address 9832 Calvin Avenue

City Northridge State CA Zip Code 91324

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

Name of Employer Northwest Excavating Co., Inc. Occupation contractor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 09 / 2015

**Transaction ID : SA11AI.4756**

Amount of Each Receipt this Period  
 100000.00

**C. Juan A. Gutierrez**  
Full Name (Last, First, Middle Initial)

Mailing Address 15 Evergreen Lane

City Colts Neck State NJ Zip Code 07722

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

Name of Employer n/a Occupation retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
30000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 16 / 2015

**Transaction ID : SA11AI.4461**

Amount of Each Receipt this Period  
 30000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2630000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (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 107
	<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 Solutions PAC**

**A. H. Irwin Levy, LLC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1601 Forum Place, #500  
 City West Palm Beach State FL Zip Code 33401  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 02 / 2015  
**Transaction ID : SA11AI.4711**  
 Amount of Each Receipt this Period  
 10000.00

**B. David A. Hager**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2800 Chaumont  
 City Edmond State OK Zip Code 73034  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Devon Energy Corporation president & ceo  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 30000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 21 / 2015  
**Transaction ID : SA11AI.4820**  
 Amount of Each Receipt this Period  
 30000.00

**c. Hamister Group, Inc.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10 Lafayette Square, #1900  
 City Buffalo State NY Zip Code 14203  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 20000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 26 / 2015  
**Transaction ID : SA11AI.4517**  
 Amount of Each Receipt this Period  
 20000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 107
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Conservative Solutions PAC**

Full Name (Last, First, Middle Initial) <b>A. Helios Holdings</b>		Date of Receipt
Mailing Address 3350 Riverwood Pkwy. Suite 2070		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2015"/>
City	State	Zip Code
Atlanta	GA	30339
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="50000.00"/>	
		Transaction ID : SA11AI.4889
		Amount of Each Receipt this Period
		<input type="text" value="50000.00"/>

Full Name (Last, First, Middle Initial) <b>B. Chris Henick</b>		Date of Receipt
Mailing Address 4201 Yuma Street, N.W.		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City	State	Zip Code
Washington	DC	20016
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
self-employed	consultant	
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"/>	
		Transaction ID : SA11AI.4870
		Amount of Each Receipt this Period
		<input type="text" value="500.00"/>

Full Name (Last, First, Middle Initial) <b>C. David Herro</b>		Date of Receipt
Mailing Address 65 E. Goethe, #3W		<input type="text" value="11"/> / <input type="text" value="20"/> / <input type="text" value="2015"/>
City	State	Zip Code
Chicago	IL	60610
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Harris Associates, LP	investment manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="250000.00"/>	
		Transaction ID : SA11AI.4688
		Amount of Each Receipt this Period
		<input type="text" value="150000.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="200500.00"/>
<b>TOTAL</b> 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 25 OF 107
	<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 Solutions PAC**

**A. Hobby Lobby Stores, Inc.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7707 S.W. 44th Street  
 City Oklahoma City State OK Zip Code 73179  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 14 / 2015  
**Transaction ID : SA11AI.4450**  
 Amount of Each Receipt this Period  
 10000.00

**B. Holland & Knight LLP**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 524 Grand Regency Blvd.  
 City Brandon State FL Zip Code 33510  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 14 / 2015  
**Transaction ID : SA11AI.4669**  
 Amount of Each Receipt this Period  
 10000.00

**C. David C. Humphreys**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P. O. Box 4050  
 City Joplin State MO Zip Code 64803  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 TAMKO Building Products executive  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 15 / 2015  
**Transaction ID : SA11AI.4778**  
 Amount of Each Receipt this Period  
 1000000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1020000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 107
	<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 Solutions PAC**

**A. IGX, LLC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2711 Centerville Road  
 Suite 400  
 City State Zip Code  
 Wilmington DE 19808  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 26 / 2015  
**Transaction ID : SA11AI.4521**  
 Amount of Each Receipt this Period  
 500000.00

**B. Mark Johnson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13631 Windward Circle  
 City State Zip Code  
 Anchorage AK 99516  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Chugach Electric Association 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  
 12 / 17 / 2015  
**Transaction ID : SA11AI.4782**  
 Amount of Each Receipt this Period  
 250.00

**C. Louis D. Jorndt**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1038 Cayuga Drive  
 City State Zip Code  
 Northbrook IL 60062  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 n/a retired  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 10000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2015  
**Transaction ID : SA11AI.4894**  
 Amount of Each Receipt this Period  
 10000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	510250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 107
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Conservative Solutions PAC**

**A. John N. Kahn**  
Full Name (Last, First, Middle Initial)

Mailing Address 251 Jungle Road

City State Zip Code  
Palm Beach FL 33480

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

Name of Employer Occupation  
n/a retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 04 / 2015

**Transaction ID : SA11AI.4571**

Amount of Each Receipt this Period  
5000.00

**B. Ely Keenberg**  
Full Name (Last, First, Middle Initial)

Mailing Address 3637 Loadstone Drive

City State Zip Code  
Sherman Oaks CA 90023

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

Name of Employer Occupation  
Ekco Metals owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 22 / 2015

**Transaction ID : SA11AI.4823**

Amount of Each Receipt this Period  
10000.00

**C. Mark Kingdon**  
Full Name (Last, First, Middle Initial)

Mailing Address 993 Fifth Avenue

City State Zip Code  
New York NY 10028

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

Name of Employer Occupation  
Kingdon Capital Management LLC investment manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
40000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 19 / 2015

**Transaction ID : SA11AI.4794**

Amount of Each Receipt this Period  
40000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	55000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (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 107
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Conservative Solutions PAC**

Full Name (Last, First, Middle Initial)  
**A. Mark Kingdon**

Mailing Address 993 Fifth Avenue

City New York State NY Zip Code 10028

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

Name of Employer Kingdon Capital Management LLC Occupation investment manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
90000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 26 / 2015  
**Transaction ID : SA11AI.4835**

Amount of Each Receipt this Period  
 50000.00

Full Name (Last, First, Middle Initial)  
**B. Mark Kistulinec**

Mailing Address 3773 Haddon Hall Road, N.W.

City Atlanta State GA Zip Code 30327

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

Name of Employer Boston Consulting Group Occupation management consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 15 / 2015  
**Transaction ID : SA11AI.4650**

Amount of Each Receipt this Period  
 10000.00

Full Name (Last, First, Middle Initial)  
**C. Seth A. Klarman**

Mailing Address P.O. Box 171733

City Boston State MA Zip Code 02117

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

Name of Employer The Baupost Group, LLC Occupation president

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 04 / 2015  
**Transaction ID : SA11AI.4726**

Amount of Each Receipt this Period  
 250000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 310000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 107
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Conservative Solutions PAC**

Full Name (Last, First, Middle Initial)  
**A. Christopher Koch**

Mailing Address 160 Delaware Avenue

City Buffalo State NY Zip Code 14202

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

Name of Employer New Era Cap Co. Occupation c.e.o.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
14200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2015

**Transaction ID : SA11AI.4376**

Amount of Each Receipt this Period  
14200.00

Full Name (Last, First, Middle Initial)  
**B. Edward Levy**

Mailing Address 970 Shirley Road

City Birmingham State MI Zip Code 48009

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

Name of Employer Edward Levy Company Occupation corporate executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2015

**Transaction ID : SA11AI.4800**

Amount of Each Receipt this Period  
25000.00

Full Name (Last, First, Middle Initial)  
**c. J. Robert Long**

Mailing Address 1249 N. Lakeshore Drive

City Sarasota State FL Zip Code 34231

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

Name of Employer J.R.L. Ventures, Inc. Occupation owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 26 / 2015

**Transaction ID : SA11AI.4526**

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	44200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 107
	<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 Solutions PAC**

**A. Paul B. Marrow**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11 Hunting Ridge Place  
 City Chappaqua State NY Zip Code 10514  
 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 M / D D D / Y Y Y Y Y Y  
 09 / 24 / 2015  
**Transaction ID : SA11AI.4468**  
 Amount of Each Receipt this Period  
**250.00**

**B. J. Landis Martin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 150 Vine Street  
 City Denver State CO Zip Code 80206  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Platte River Equity Occupation founder/managing director  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **10000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 28 / 2015  
**Transaction ID : SA11AI.4474**  
 Amount of Each Receipt this Period  
**10000.00**

**C. Jennifer Maurer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2119 S.W. 16th Terrace  
 City Fort Lauderdale State FL Zip Code 33315  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Automated Healthcare Solutions Occupation attorney  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **2700.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 07 / 2015  
**Transaction ID : SA11AI.4601**  
 Amount of Each Receipt this Period  
**2700.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>12950.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (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 107
	<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 Solutions PAC**

**A. Susan H. Maurer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3600 N. Federal Highway  
 City Fort Lauderdale State FL Zip Code 33308  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Panza Maurer & Maynard Occupation attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 07 / 2015  
**Transaction ID : SA11AI.4595**  
 Amount of Each Receipt this Period  
 2700.00

**B. Matt Mcilwain**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5736 64th Avenue N.E.  
 City Seattle State WA Zip Code 98105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Madrona Venture Group Occupation venture capital  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2015  
**Transaction ID : SA11AI.4553**  
 Amount of Each Receipt this Period  
 5000.00

**C. Robert C. McNair**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address NRG Stadium, Two NRG Park  
 City Houston State TX Zip Code 77054  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Houston Texans Occupation chairman/c.e.o.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 24 / 2015  
**Transaction ID : SA11AI.4418**  
 Amount of Each Receipt this Period  
 500000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	507700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 107
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Conservative Solutions PAC**

Full Name (Last, First, Middle Initial)  
**A. Michael M. Mills**

Mailing Address 1520 Beach Drive, N.E.

City Saint Petersburg	State FL	Zip Code 33704
--------------------------	-------------	-------------------

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

Name of Employer Holland & Knight LLP	Occupation attorney
--	------------------------

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	/	2015

**Transaction ID : SA11AI.4667**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**B. Mulkey & Rendo**

Mailing Address 700 79th Street

City North Bergen	State NJ	Zip Code 07047
----------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	24	/	2015

**Transaction ID : SA11AI.4378**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**c. Charlene Jo Neal**

Mailing Address 1003 59th Street, N.W.

City Bradenton	State FL	Zip Code 34209
-------------------	-------------	-------------------

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

Name of Employer Charlene Neal Pure Style, Inc.	Occupation president
--	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2015

**Transaction ID : SA11AI.4655**

Amount of Each Receipt this Period  
10000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	11000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (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 107
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Conservative Solutions PAC**

Full Name (Last, First, Middle Initial)  
**A. NeuroScience Centers of Florida Foundation**

Mailing Address 2150 Coral Way, 8th Floor

City	State	Zip Code
Miami	FL	33145

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

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	29	/	2015

**Transaction ID : SA11AI.4485**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**B. NG Montana LLC**

Mailing Address 2880 N. 55th W.

City	State	Zip Code
Idaho Falls	ID	83402

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

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
85000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2015

**Transaction ID : SA11AI.4883**

Amount of Each Receipt this Period  
85000.00

Full Name (Last, First, Middle Initial)  
**C. J. Larry Nichols**

Mailing Address 7011 N. Country Club Drive

City	State	Zip Code
Oklahoma City	OK	73116

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

Name of Employer	Occupation
Devon Energy Corporation	executive chairman

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	21	/	2015

**Transaction ID : SA11AI.4821**

Amount of Each Receipt this Period  
50000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	140000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (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 107
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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 Solutions PAC**

Full Name (Last, First, Middle Initial)  
**A. Dorothy Panza**

Mailing Address 3600 N. Federal Highway

City Fort Lauderdale State FL Zip Code 33308

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

Name of Employer n/a Occupation homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 07 / 2015  
**Transaction ID : SA11AI.4599**

Amount of Each Receipt this Period  
 2700.00

Full Name (Last, First, Middle Initial)  
**B. Thomas Panza**

Mailing Address 3600 N. Federal Highway

City Fort Lauderdale State FL Zip Code 33308

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

Name of Employer Panza Maurer & Maynard Occupation attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 07 / 2015  
**Transaction ID : SA11AI.4597**

Amount of Each Receipt this Period  
 2700.00

Full Name (Last, First, Middle Initial)  
**C. Scott F. Partridge**

Mailing Address 5545 Sugar Hill Drive

City Houston State TX Zip Code 77056

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

Name of Employer Baker Botts Occupation attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 13 / 2015  
**Transaction ID : SA11AI.4638**

Amount of Each Receipt this Period  
 5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10400.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 107
	<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 Solutions PAC**

Full Name (Last, First, Middle Initial) <b>A. Thomas Paulson</b>		Date of Receipt MM / DD / YYYY 11 / 06 / 2015 <b>Transaction ID : SA11AI.4580</b>
Mailing Address 5501 Cody Drive		Amount of Each Receipt this Period 250.00
City West Des Moines	State IA	Zip Code 50266
FEC ID number of contributing federal political committee. C		
Name of Employer Iowa ENT Center	Occupation physician	
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>B. William D. Perez</b>		Date of Receipt MM / DD / YYYY 08 / 28 / 2015 <b>Transaction ID : SA11AI.4428</b>
Mailing Address 1320 N. State Parkway, #14A		Amount of Each Receipt this Period 25000.00
City Chicago	State IL	Zip Code 60610
FEC ID number of contributing federal political committee. C		
Name of Employer n/a	Occupation retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50000.00	

Full Name (Last, First, Middle Initial) <b>C. Wayne Perry</b>		Date of Receipt MM / DD / YYYY 11 / 03 / 2015 <b>Transaction ID : SA11AI.4569</b>
Mailing Address P.O. Box 645		Amount of Each Receipt this Period 10000.00
City Medina	State WA	Zip Code 98039
FEC ID number of contributing federal political committee. C		
Name of Employer Shotgun Creek Investments, LLC	Occupation c.e.o.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	35250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 36 OF 107  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Conservative Solutions PAC**

Full Name (Last, First, Middle Initial)  
**A. Richard Porter**

Mailing Address 875 Bryant Avenue

City State Zip Code  
Winnetka IL 60093

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

Name of Employer Occupation  
Kirkland & Ellis lawyer

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 30 / 2015  
**Transaction ID : SA11AI.4576**

Amount of Each Receipt this Period  
10000.00

Full Name (Last, First, Middle Initial)  
**B. PrimeMed Physician Network, LLC**

Mailing Address 6100 Blue Lagoon Drive, #430

City State Zip Code  
Miami FL 33126

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 16 / 2015  
**Transaction ID : SA11AI.4677**

Amount of Each Receipt this Period  
10000.00

Full Name (Last, First, Middle Initial)  
**C. Andrew Puzder**

Mailing Address 6307 Carpinteria Avenue

City State Zip Code  
Carpinteria CA 93013

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

Name of Employer Occupation  
CKE Restaurants, Inc. c.e.o

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 29 / 2015  
**Transaction ID : SA11AI.4536**

Amount of Each Receipt this Period  
10000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 30000.00

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

**SCHEDULE A (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 107
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Conservative Solutions PAC**

Full Name (Last, First, Middle Initial) <b>A. Balaji Rajan</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 11 / 2015
Mailing Address 490 Eton Drive		<b>Transaction ID : SA11AI.4758</b>
City North Barrington	State IL	Zip Code 60010
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5000.00
Name of Employer Ceannate Corp.	Occupation c.e.o.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>B. Robert M. Regan Jr.</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 27 / 2015
Mailing Address 4235 N. 23rd Street		<b>Transaction ID : SA11AI.4528</b>
City Arlington	State VA	Zip Code 22207
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50000.00
Name of Employer 21st Century Fox	Occupation attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50000.00	

Full Name (Last, First, Middle Initial) <b>C. Jeffrey Rice</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 13 / 2015
Mailing Address 101B Foster Road		<b>Transaction ID : SA11AI.4505</b>
City Moorestown	State NJ	Zip Code 08057
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 200.00
Name of Employer Comtrex Systems Corporation	Occupation president	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	55200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 107
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Conservative Solutions PAC**

**A. John Rooney**  
Full Name (Last, First, Middle Initial)

Mailing Address 110 Sunset Avenue, #2A

City Palm Beach	State FL	Zip Code 33480
--------------------	-------------	-------------------

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

Name of Employer Palm Beach Kennel Club	Occupation owner
--	---------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

**Transaction ID : SA11AI.4784**

Amount of Each Receipt this Period  
25000.00

**B. Patrick Rooney**  
Full Name (Last, First, Middle Initial)

Mailing Address 1111 N. Congress Avenue

City West Palm Beach	State FL	Zip Code 33409
-------------------------	-------------	-------------------

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

Name of Employer Palm Beach Kennel Club	Occupation owner
--	---------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

**Transaction ID : SA11AI.4788**

Amount of Each Receipt this Period  
25000.00

**C. Rose Moser & Allyn Public Relations & Online Relations**  
Full Name (Last, First, Middle Initial)

Mailing Address 7144 E. Stetson Drive, #400

City Scottsdale	State AZ	Zip Code 85251
--------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	04	/	2015

**Transaction ID : SA11AI.4731**

Amount of Each Receipt this Period  
10000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	60000.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (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 107
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Conservative Solutions PAC**

**A. Elisha Rothman**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3370 N.E. 190th Street, #3900

City Aventura	State FL	Zip Code 33180
FEC ID number of contributing federal political committee. C		
Name of Employer Rothman Capital, LLC	Occupation manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
11 / 07 / 2015  
**Transaction ID : SA11AI.4605**

Amount of Each Receipt this Period  
5000.00

**B. John W. Rowe**  
Full Name (Last, First, Middle Initial)  
Mailing Address 950 N. Michigan Avenue, #3306

City Chicago	State IL	Zip Code 60611
FEC ID number of contributing federal political committee. C		
Name of Employer n/a	Occupation retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 05 / 2015  
**Transaction ID : SA11AI.4729**

Amount of Each Receipt this Period  
5000.00

**C. William D. Rubin**  
Full Name (Last, First, Middle Initial)  
Mailing Address 10581 Grayhawk Street

City Plantation	State FL	Zip Code 33324
FEC ID number of contributing federal political committee. C		
Name of Employer The Rubin Group	Occupation president	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
11 / 07 / 2015  
**Transaction ID : SA11AI.4607**

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).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 107
	<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 Solutions PAC**

**A. Ricky C. Sandler**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1185 Park Avenue, #16F  
 City New York State NY Zip Code 10128  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Eminence Capital, LP Occupation financial services  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 100000.00

Date of Receipt 12 / 22 / 2015  
**Transaction ID : SA11AI.4825**  
 Amount of Each Receipt this Period 100000.00

**B. Henry Scanlon**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 837 Ponte Vedra Blvd.  
 City Ponte Vedra Beach State FL Zip Code 32082  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer n/a Occupation retired  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 10000.00

Date of Receipt 11 / 12 / 2015  
**Transaction ID : SA11AI.4705**  
 Amount of Each Receipt this Period 5000.00

**C. James M. Schoonmaker II**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3701 Nelson's Walk  
 City Naples State FL Zip Code 34102  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer n/a Occupation retired  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 2500.00

Date of Receipt 11 / 02 / 2015  
**Transaction ID : SA11AI.4549**  
 Amount of Each Receipt this Period 2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	107500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 107
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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 Solutions PAC**

Full Name (Last, First, Middle Initial) <b>A. Patrice H. Schoonmaker</b>		Date of Receipt MM / DD / YYYY 11 / 02 / 2015 <b>Transaction ID : SA11AI.4551</b>
Mailing Address 3701 Nelson's Walk		Amount of Each Receipt this Period 2500.00
City Naples	State FL	Zip Code 34102
FEC ID number of contributing federal political committee. C		
Name of Employer n/a	Occupation retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) <b>B. Robert Shapiro</b>		Date of Receipt MM / DD / YYYY 11 / 02 / 2015 <b>Transaction ID : SA11AI.4555</b>
Mailing Address 14225 Ventura Boulevard, #100		Amount of Each Receipt this Period 15000.00
City Sherman Oaks	State CA	Zip Code 91423
FEC ID number of contributing federal political committee. C		
Name of Employer Woodbridge Realty of Colorado	Occupation president	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15000.00	

Full Name (Last, First, Middle Initial) <b>C. Robert Shapiro</b>		Date of Receipt MM / DD / YYYY 12 / 07 / 2015 <b>Transaction ID : SA11AI.4741</b>
Mailing Address 14225 Ventura Boulevard, #100		Amount of Each Receipt this Period 15000.00
City Sherman Oaks	State CA	Zip Code 91423
FEC ID number of contributing federal political committee. C		
Name of Employer Woodbridge Realty of Colorado	Occupation president	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 30000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	32500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 107
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Conservative Solutions PAC**

Full Name (Last, First, Middle Initial)  
**A. Robert Shillman**

Mailing Address P. O. Box 676267

City Rancho Santa Fe State CA Zip Code 92067

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

Name of Employer Cognex Corporation Occupation executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
35000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2015  
**Transaction ID : SA11AI.4508**

Amount of Each Receipt this Period  
25000.00

Full Name (Last, First, Middle Initial)  
**B. Sima Communications of Tampa, LLC**

Mailing Address 1805 N. Franklin Street

City Tampa State FL Zip Code 33602

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 16 / 2015  
**Transaction ID : SA11AI.4457**

Amount of Each Receipt this Period  
2700.00

Full Name (Last, First, Middle Initial)  
**C. Paul Elliot Singer**

Mailing Address 40 W. 57th St., #FL30

City New York State NY Zip Code 10019

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

Name of Employer Elliott Management Corp. Occupation c.e.o.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 25 / 2015  
**Transaction ID : SA11AI.4697**

Amount of Each Receipt this Period  
2500000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2527700.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 107
	<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 Solutions PAC**

Full Name (Last, First, Middle Initial)  
**A. Southeast QSR, LLC**

Mailing Address 1340 Hamlet Avenue

City Clearwater State FL Zip Code 33756

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 04 / 2015

**Transaction ID : SA11AI.4737**

Amount of Each Receipt this Period  
10000.00

Full Name (Last, First, Middle Initial)  
**B. Southern Procurement Services, Inc.**

Mailing Address 2550 S. Bayshore Drive, #103B

City Coconut Grove State FL Zip Code 33133

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 14 / 2015

**Transaction ID : SA11AI.4673**

Amount of Each Receipt this Period  
10000.00

Full Name (Last, First, Middle Initial)  
**C. Southern Wine & Spirits of America, Inc.**

Mailing Address 2400 S.W. 145th Avenue, #300

City Miramar State FL Zip Code 33027

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 29 / 2015

**Transaction ID : SA11AI.4383**

Amount of Each Receipt this Period  
250000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	270000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 107
	<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 Solutions PAC**

Full Name (Last, First, Middle Initial)  
**A. Mary M. Spencer**

Mailing Address 799 Crandon Blvd., #1101

City Key Biscayne	State FL	Zip Code 33149
----------------------	-------------	-------------------

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

Name of Employer n/a	Occupation investor
-------------------------	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2015

**Transaction ID : SA11AI.4513**

Amount of Each Receipt this Period  
1000000.00

Full Name (Last, First, Middle Initial)  
**B. James Stanard**

Mailing Address 15 Linden Lane

City Chatham	State NJ	Zip Code 07928
-----------------	-------------	-------------------

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

Name of Employer n/a	Occupation retired
-------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2015

**Transaction ID : SA11AI.4896**

Amount of Each Receipt this Period  
25000.00

Full Name (Last, First, Middle Initial)  
**c. Star Freight, LLC**

Mailing Address 557 W. Plant Street

City Winter Garden	State FL	Zip Code 34787
-----------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2015

**Transaction ID : SA11AI.4470**

Amount of Each Receipt this Period  
3000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1028000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 107
	<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 Solutions PAC**

**A. James E. Stephenson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P. O. Box 43326  
 City Atlanta State GA Zip Code 30336  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Yancey Bros Co. Occupation c.e.o.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 08 / 20 / 2015  
**Transaction ID : SA11AI.4416**  
 Amount of Each Receipt this Period 10000.00

**B. Steven M. Greenberg, P.A.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7900 Glades Road, #520  
 City Boca Raton State FL Zip Code 33434  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 11 / 2015  
**Transaction ID : SA11AI.4762**  
 Amount of Each Receipt this Period 1000.00

**C. Sunovion**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 84 Waterford Drive  
 City Marlborough State MA Zip Code 01752  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 09 / 28 / 2015  
**Transaction ID : SA11AI.4476**  
 Amount of Each Receipt this Period 3000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	14000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (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 107
	<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 Solutions PAC**

Full Name (Last, First, Middle Initial)  
**A. Sunshine Gasoline Distributors, Inc.**

Mailing Address 1650 N.W. 87th Avenue

City Miami	State FL	Zip Code 33172
---------------	-------------	-------------------

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 17 / 2015

**Transaction ID : SA11AI.4413**

Amount of Each Receipt this Period  
25000.00

Full Name (Last, First, Middle Initial)  
**B. Judith H. Swartz**

Mailing Address 1001 S. Ocean Blvd.

City Delray Beach	State FL	Zip Code 33483
----------------------	-------------	-------------------

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

Name of Employer Occupation  
n/a 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 / 03 / 2015

**Transaction ID : SA11AI.4586**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**C. Tania Tapciuc**

Mailing Address 1753 N. View Drive

City Miami Beach	State FL	Zip Code 33140
---------------------	-------------	-------------------

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

Name of Employer Occupation  
self-employed

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
20000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 23 / 2015

**Transaction ID : SA11AI.4690**

Amount of Each Receipt this Period  
20000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	46000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 107
	<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 Solutions PAC**

**A. Don Tapia**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4805 E. Roadrunner Road  
 City Paradise Valley State AZ Zip Code 85253  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer n/a Occupation retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 14 / 2015  
**Transaction ID : SA11AI.4506**  
 Amount of Each Receipt this Period  
 50000.00

**B. The Urban Development Group, LLC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2100 S.W. 4 Avenue  
 City Miami State FL Zip Code 33129  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 16 / 2015  
**Transaction ID : SA11AI.4675**  
 Amount of Each Receipt this Period  
 2700.00

**C. Titan Peach Farms, Inc.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5 R.W. DuBose Road  
 City Ridge Spring State SC Zip Code 29129  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 26 / 2015  
**Transaction ID : SA11AI.4837**  
 Amount of Each Receipt this Period  
 25000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	77700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (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 107
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Conservative Solutions PAC**

Full Name (Last, First, Middle Initial) <b>A. TMCV #2 LLC</b>		Date of Receipt
Mailing Address 497 N. Capital Avenue Suite 100		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City	State	Zip Code
Idaho Falls	ID	83402
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.4884</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="90000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="90000.00"/>	

Full Name (Last, First, Middle Initial) <b>B. TRT Holdings, Inc.</b>		Date of Receipt
Mailing Address 4001 Maple Avenue, #600		<input type="text" value="11"/> / <input type="text" value="12"/> / <input type="text" value="2015"/>
City	State	Zip Code
Dallas	TX	75219
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.4707</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="20000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="45000.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Frank L. Vandersloot</b>		Date of Receipt
Mailing Address P. O. Box 50305		<input type="text" value="07"/> / <input type="text" value="01"/> / <input type="text" value="2015"/>
City	State	Zip Code
Idaho Falls	ID	83405
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.4353</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Melaleuca, Inc.	c.e.o.	<input type="text" value="50000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="50000.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="160000.00"/>
<b>TOTAL</b> 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 49 OF 107
	<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 Solutions PAC**

**A. Frank L. Vandersloot**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P. O. Box 50305  
 City Idaho Falls State ID Zip Code 83405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Melaleuca, Inc. Occupation c.e.o.  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **150000.00**

Date of Receipt **12 / 31 / 2015**  
**Transaction ID : SA11AI.4888**  
 Amount of Each Receipt this Period **100000.00**

**B. Esther Wachtell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10883 Oak Knoll Road  
 City Ojai State CA Zip Code 93023  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer self-employed Occupation investor/farmer  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **50000.00**

Date of Receipt **09 / 29 / 2015**  
**Transaction ID : SA11AI.4479**  
 Amount of Each Receipt this Period **25000.00**

**C. Esther Wachtell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10883 Oak Knoll Road  
 City Ojai State CA Zip Code 93023  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer self-employed Occupation investor/farmer  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **75000.00**

Date of Receipt **11 / 24 / 2015**  
**Transaction ID : SA11AI.4692**  
 Amount of Each Receipt this Period **25000.00**

**SUBTOTAL** of Receipts This Page (optional)..... **150000.00**  
**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (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 107
	<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 Solutions PAC**

Full Name (Last, First, Middle Initial) <b>A. Gaines Wehrle</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 11 / 2015 <b>Transaction ID : SA11AI.4631</b>
Mailing Address 11444 W. Olympic Blvd. 11th Floor		Amount of Each Receipt this Period 20000.00
City Los Angeles	State Zip Code CA 90064	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 20000.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. David J. White</b>		Date of Receipt M M / D D / Y Y Y Y Y 08 / 04 / 2015 <b>Transaction ID : SA11AI.4395</b>
Mailing Address 2747 Springhill Road		Amount of Each Receipt this Period 25000.00
City Clifton Heights	State Zip Code PA 19018	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 25000.00
Name of Employer DWD Mechanical	Occupation executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	45000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	14085850.00

**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 51 OF 107
<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)  
**Conservative Solutions PAC**

Full Name (Last, First, Middle Initial)  
**A. Community Leadership PAC, Inc.**

Mailing Address P. O. Box 26141

City Alexandria State VA Zip Code 22313

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 02 / 2015  
**Transaction ID : SA11C.4492**

Amount of Each Receipt this Period  
 200000.00

Full Name (Last, First, Middle Initial)  
**B. Conservatives for Effective Government**

Mailing Address P. O. Box 26141

City Alexandria State VA Zip Code 22313

FEC ID number of contributing federal political committee. **C C00574749**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 04 / 2015  
**Transaction ID : SA11C.4739**

Amount of Each Receipt this Period  
 100000.00

Full Name (Last, First, Middle Initial)  
**C. VoteKelsey.com**

Mailing Address 1661 Aaron Brenner Drive, #300

City Memphis State TN Zip Code 38120

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 16 / 2015  
**Transaction ID : SA11C.4511**

Amount of Each Receipt this Period  
 5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	305000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	305000.00

**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 Solutions PAC**

Full Name (Last, First, Middle Initial)

**A. 527 Services Corporation**

Mailing Address 610 S. Boulevard

City Tampa State FL Zip Code 33606

Purpose of Disbursement fundraising

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 13 / 2015

Transaction ID : SB21B.4409

Amount of Each Disbursement this Period

7525.00

Full Name (Last, First, Middle Initial)

**B. 527 Services Corporation**

Mailing Address 610 S. Boulevard

City Tampa State FL Zip Code 33606

Purpose of Disbursement fundraising

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 21 / 2015

Transaction ID : SB21B.4516

Amount of Each Disbursement this Period

11787.50

Full Name (Last, First, Middle Initial)

**C. 527 Services Corporation**

Mailing Address 610 S. Boulevard

City Tampa State FL Zip Code 33606

Purpose of Disbursement fundraising

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 23 / 2015

Transaction ID : SB21B.4817

Amount of Each Disbursement this Period

7734.17

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

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

27046.67

**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 Solutions PAC**

Full Name (Last, First, Middle Initial)

**A. BASK Digital Media, LLC**

Mailing Address 15260 Ventura Blvd., #1240

City Sherman Oaks State CA Zip Code 91403

Purpose of Disbursement  
digital consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 27 / 2015

Transaction ID : **SB21B.4422**

Amount of Each Disbursement this Period

7500.00

Full Name (Last, First, Middle Initial)

**B. BASK Digital Media, LLC**

Mailing Address 15260 Ventura Blvd., #1240

City Sherman Oaks State CA Zip Code 91403

Purpose of Disbursement  
website development/hosting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 27 / 2015

Transaction ID : **SB21B.4424**

Amount of Each Disbursement this Period

6400.00

Full Name (Last, First, Middle Initial)

**C. BASK Digital Media, LLC**

Mailing Address 15260 Ventura Blvd., #1240

City Sherman Oaks State CA Zip Code 91403

Purpose of Disbursement  
digital 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 / 03 / 2015

Transaction ID : **SB21B.4438**

Amount of Each Disbursement this Period

7500.00

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

21400.00

**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 Solutions PAC**

Full Name (Last, First, Middle Initial)

**A. BASK Digital Media, LLC**

Mailing Address 15260 Ventura Blvd., #1240

City Sherman Oaks State CA Zip Code 91403

Purpose of Disbursement digital consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 08 / 2015

Transaction ID : SB21B.4500

Amount of Each Disbursement this Period

7500.00

Full Name (Last, First, Middle Initial)

**B. BASK Digital Media, LLC**

Mailing Address 15260 Ventura Blvd., #1240

City Sherman Oaks State CA Zip Code 91403

Purpose of Disbursement website development

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2015

Transaction ID : SB21B.4530

Amount of Each Disbursement this Period

6250.00

Full Name (Last, First, Middle Initial)

**C. BASK Digital Media, LLC**

Mailing Address 15260 Ventura Blvd., #1240

City Sherman Oaks State CA Zip Code 91403

Purpose of Disbursement digital consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 05 / 2015

Transaction ID : SB21B.4573

Amount of Each Disbursement this Period

6500.00

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

20250.00

**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 Solutions PAC**

Full Name (Last, First, Middle Initial)

**A. BASK Digital Media, LLC**

Mailing Address 15260 Ventura Blvd., #1240

City Sherman Oaks State CA Zip Code 91403

Purpose of Disbursement  
digital consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 03 / 2015

**Transaction ID : SB21B.4715**

Amount of Each Disbursement this Period

6500.00

Full Name (Last, First, Middle Initial)

**B. Basswood Research**

Mailing Address 4550 Montgomery Avenue, #906

City Bethesda State MD Zip Code 20814

Purpose of Disbursement  
research

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 03 / 2015

**Transaction ID : SB21B.4566**

Amount of Each Disbursement this Period

74590.00

Full Name (Last, First, Middle Initial)

**C. Basswood Research**

Mailing Address 4550 Montgomery Avenue, #906

City Bethesda State MD Zip Code 20814

Purpose of Disbursement  
research

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 23 / 2015

**Transaction ID : SB21B.4808**

Amount of Each Disbursement this Period

99426.00

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

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

180516.00

**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 Solutions PAC**

Full Name (Last, First, Middle Initial)

**A. Charter One Yachts**

Mailing Address 4419 W. Tradewinds Avenue

City State Zip Code  
Lauderdale by the Sea FL 33308

Purpose of Disbursement  
catering

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 12 / 2015

**Transaction ID : SB21B.4628**

Amount of Each Disbursement this Period

2390.30

Full Name (Last, First, Middle Initial)

**B. Cold Spark Media, Inc.**

Mailing Address 307 Fourth Avenue, #920

City State Zip Code  
Pittsburgh PA 15222

Purpose of Disbursement  
special project coordination

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 01 / 2015

**Transaction ID : SB21B.4350**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. Cold Spark Media, Inc.**

Mailing Address 307 Fourth Avenue, #920

City State Zip Code  
Pittsburgh PA 15222

Purpose of Disbursement  
special project coordination

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 27 / 2015

**Transaction ID : SB21B.4426**

Amount of Each Disbursement this Period

3750.00

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

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

8640.30

**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 Solutions PAC**

Full Name (Last, First, Middle Initial)

**A. Cold Spark Media, Inc.**

Mailing Address 307 Fourth Avenue, #920

City Pittsburgh State PA Zip Code 15222

Purpose of Disbursement  
special project coordination

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 03 / 2015

Transaction ID : **SB21B.4437**

Amount of Each Disbursement this Period

3750.00

Full Name (Last, First, Middle Initial)

**B. Cold Spark Media, Inc.**

Mailing Address 307 Fourth Avenue, #920

City Pittsburgh State PA Zip Code 15222

Purpose of Disbursement  
special project coordination

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 01 / 2015

Transaction ID : **SB21B.4487**

Amount of Each Disbursement this Period

3750.00

Full Name (Last, First, Middle Initial)

**C. Cold Spark Media, Inc.**

Mailing Address 307 Fourth Avenue, #920

City Pittsburgh State PA Zip Code 15222

Purpose of Disbursement  
media analysis

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2015

Transaction ID : **SB21B.4531**

Amount of Each Disbursement this Period

3918.20

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

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

11418.20

**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 Solutions PAC**

Full Name (Last, First, Middle Initial)

**A. Cold Spark Media, Inc.**

Mailing Address 307 Fourth Avenue, #920

City Pittsburgh State PA Zip Code 15222

Purpose of Disbursement  
project coordination/media

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 03 / 2015

Transaction ID : **SB21B.4562**

Amount of Each Disbursement this Period

6268.63

Full Name (Last, First, Middle Initial)

**B. Cold Spark Media, Inc.**

Mailing Address 307 Fourth Avenue, #920

City Pittsburgh State PA Zip Code 15222

Purpose of Disbursement  
media analysis/research

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 12 / 2015

Transaction ID : **SB21B.4636**

Amount of Each Disbursement this Period

2890.36

Full Name (Last, First, Middle Initial)

**C. Cold Spark Media, Inc.**

Mailing Address 307 Fourth Avenue, #920

City Pittsburgh State PA Zip Code 15222

Purpose of Disbursement  
media analysis

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 20 / 2015

Transaction ID : **SB21B.4687**

Amount of Each Disbursement this Period

3000.00

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

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

12158.99

**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 Solutions PAC**

Full Name (Last, First, Middle Initial)

**A. eDonations**

Mailing Address 117 N. Saint Asaph Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
online fundraising

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.4359**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. eDonations**

Mailing Address 117 N. Saint Asaph Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
online fundraising

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.4440**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. eDonations**

Mailing Address 117 N. Saint Asaph Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
online fundraising

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.4494**

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 Solutions PAC**

Full Name (Last, First, Middle Initial)

**A. eDonations**

Mailing Address 117 N. Saint Asaph Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
online fundraising

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 04 / 2015

**Transaction ID : SB21B.4574**

Amount of Each Disbursement this Period

16743.88

Full Name (Last, First, Middle Initial)

**B. eDonations**

Mailing Address 117 N. Saint Asaph Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
online fundraising

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 03 / 2015

**Transaction ID : SB21B.4716**

Amount of Each Disbursement this Period

12031.31

Full Name (Last, First, Middle Initial)

**C. eDonations**

Mailing Address 117 N. Saint Asaph Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
online fundraising

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 18 / 2015

**Transaction ID : SB21B.4796**

Amount of Each Disbursement this Period

1433.58

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

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

30208.77

**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 Solutions PAC**

Full Name (Last, First, Middle Initial)

**A. Foley & Lardner, LLP**

Mailing Address 3000 K Street, N.W., #600

City Washington State DC Zip Code 20007

Purpose of Disbursement  
legal services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 20 / 2015

**Transaction ID : SB21B.4375**

Amount of Each Disbursement this Period

2184.00

Full Name (Last, First, Middle Initial)

**B. Foley & Lardner, LLP**

Mailing Address 3000 K Street, N.W., #600

City Washington State DC Zip Code 20007

Purpose of Disbursement  
legal services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 27 / 2015

**Transaction ID : SB21B.4425**

Amount of Each Disbursement this Period

3744.00

Full Name (Last, First, Middle Initial)

**C. Foley & Lardner, LLP**

Mailing Address 3000 K Street, N.W., #600

City Washington State DC Zip Code 20007

Purpose of Disbursement  
legal services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 24 / 2015

**Transaction ID : SB21B.4467**

Amount of Each Disbursement this Period

858.00

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

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

6786.00

**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 Solutions PAC**

Full Name (Last, First, Middle Initial)

**A. Foley & Lardner, LLP**

Mailing Address 3000 K Street, N.W., #600

City Washington State DC Zip Code 20007

Purpose of Disbursement  
legal services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 16 / 2015

**Transaction ID : SB21B.4509**

Amount of Each Disbursement this Period

858.00

Full Name (Last, First, Middle Initial)

**B. Foley & Lardner, LLP**

Mailing Address 3000 K Street, N.W., #600

City Washington State DC Zip Code 20007

Purpose of Disbursement  
legal services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 20 / 2015

**Transaction ID : SB21B.4685**

Amount of Each Disbursement this Period

5070.00

Full Name (Last, First, Middle Initial)

**C. Foley & Lardner, LLP**

Mailing Address 3000 K Street, N.W., #600

City Washington State DC Zip Code 20007

Purpose of Disbursement  
legal services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 23 / 2015

**Transaction ID : SB21B.4807**

Amount of Each Disbursement this Period

21696.00

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

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

27624.00

**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 Solutions PAC**

Full Name (Last, First, Middle Initial)

**A. Forbes Tate Partners, LLC**

Mailing Address 1099 New York Avenue, N.W.  
Suite 500

City Washington State DC Zip Code 20001

Purpose of Disbursement  
management consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 01 / 2015

**Transaction ID : SB21B.4297**

Amount of Each Disbursement this Period

6000.00

Full Name (Last, First, Middle Initial)

**B. Forbes Tate Partners, LLC**

Mailing Address 1099 New York Avenue, N.W.  
Suite 500

City Washington State DC Zip Code 20001

Purpose of Disbursement  
research

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 09 / 2015

**Transaction ID : SB21B.4362**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Forbes Tate Partners, LLC**

Mailing Address 1099 New York Avenue, N.W.  
Suite 500

City Washington State DC Zip Code 20001

Purpose of Disbursement  
management consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2015

**Transaction ID : SB21B.4386**

Amount of Each Disbursement this Period

6000.00

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

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

13000.00

**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 Solutions PAC**

Full Name (Last, First, Middle Initial)

**A. Forbes Tate Partners, LLC**

Mailing Address 1099 New York Avenue, N.W.  
Suite 500

City Washington State DC Zip Code 20001

Purpose of Disbursement  
research

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 05 / 2015

**Transaction ID : SB21B.4397**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Forbes Tate Partners, LLC**

Mailing Address 1099 New York Avenue, N.W.  
Suite 500

City Washington State DC Zip Code 20001

Purpose of Disbursement  
management 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 / 01 / 2015

**Transaction ID : SB21B.4432**

Amount of Each Disbursement this Period

6000.00

Full Name (Last, First, Middle Initial)

**C. Forbes Tate Partners, LLC**

Mailing Address 1099 New York Avenue, N.W.  
Suite 500

City Washington State DC Zip Code 20001

Purpose of Disbursement  
management consulting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 01 / 2015

**Transaction ID : SB21B.4482**

Amount of Each Disbursement this Period

6000.00

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

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

13000.00

**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 Solutions PAC**

Full Name (Last, First, Middle Initial)

**A. Forbes Tate Partners, LLC**

Mailing Address 1099 New York Avenue, N.W.  
Suite 500

City Washington State DC Zip Code 20001

Purpose of Disbursement  
research

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 01 / 2015

**Transaction ID : SB21B.4489**

Amount of Each Disbursement this Period

1000.00

**B. Forbes Tate Partners, LLC**

Mailing Address 1099 New York Avenue, N.W.  
Suite 500

City Washington State DC Zip Code 20001

Purpose of Disbursement  
research

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 08 / 2015

**Transaction ID : SB21B.4499**

Amount of Each Disbursement this Period

1000.00

**C. Forbes Tate Partners, LLC**

Mailing Address 1099 New York Avenue, N.W.  
Suite 500

City Washington State DC Zip Code 20001

Purpose of Disbursement  
management consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 02 / 2015

**Transaction ID : SB21B.4541**

Amount of Each Disbursement this Period

6000.00

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

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

8000.00

**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 Solutions PAC**

Full Name (Last, First, Middle Initial)

**A. Forbes Tate Partners, LLC**

Mailing Address 1099 New York Avenue, N.W.  
Suite 500

City Washington State DC Zip Code 20001

Purpose of Disbursement  
research

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 03 / 2015

**Transaction ID : SB21B.4560**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Forbes Tate Partners, LLC**

Mailing Address 1099 New York Avenue, N.W.  
Suite 500

City Washington State DC Zip Code 20001

Purpose of Disbursement  
management consulting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 01 / 2015

**Transaction ID : SB21B.4695**

Amount of Each Disbursement this Period

6000.00

Full Name (Last, First, Middle Initial)

**C. Forbes Tate Partners, LLC**

Mailing Address 1099 New York Avenue, N.W.  
Suite 500

City Washington State DC Zip Code 20001

Purpose of Disbursement  
research

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 03 / 2015

**Transaction ID : SB21B.4714**

Amount of Each Disbursement this Period

1000.00

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

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

8000.00

**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 Solutions PAC**

Full Name (Last, First, Middle Initial)

**A. Hammerstone Group**

Mailing Address 3240 Wilson Blvd., #210

City Arlington State VA Zip Code 22201

Purpose of Disbursement  
donor gifts

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	08	/	2015

**Transaction ID : SB21B.4746**

Amount of Each Disbursement this Period

12560.00
----------

Full Name (Last, First, Middle Initial)

**B. J. Warren Tompkins, Inc.**

Mailing Address P.O. Box 11458

City Columbia State SC Zip Code 29211

Purpose of Disbursement  
PAC management

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	01	/	2015

**Transaction ID : SB21B.4298**

Amount of Each Disbursement this Period

12500.00
----------

Full Name (Last, First, Middle Initial)

**C. J. Warren Tompkins, Inc.**

Mailing Address P.O. Box 11458

City Columbia State SC Zip Code 29211

Purpose of Disbursement  
travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	16	/	2015

**Transaction ID : SB21B.4374**

Amount of Each Disbursement this Period

4687.39
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

29747.39
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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 Solutions PAC**

Full Name (Last, First, Middle Initial)

**A. J. Warren Tompkins, Inc.**

Mailing Address P.O. Box 11458

City Columbia State SC Zip Code 29211

Purpose of Disbursement  
PAC management

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2015

**Transaction ID : SB21B.4387**

Amount of Each Disbursement this Period

12500.00

Full Name (Last, First, Middle Initial)

**B. J. Warren Tompkins, Inc.**

Mailing Address P.O. Box 11458

City Columbia State SC Zip Code 29211

Purpose of Disbursement  
travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 19 / 2015

**Transaction ID : SB21B.4415**

Amount of Each Disbursement this Period

1702.27

Full Name (Last, First, Middle Initial)

**C. J. Warren Tompkins, Inc.**

Mailing Address P.O. Box 11458

City Columbia State SC Zip Code 29211

Purpose of Disbursement  
PAC management

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 01 / 2015

**Transaction ID : SB21B.4434**

Amount of Each Disbursement this Period

12500.00

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

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

26702.27

**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 Solutions PAC**

Full Name (Last, First, Middle Initial)

**A. J. Warren Tompkins, Inc.**

Mailing Address P.O. Box 11458

City Columbia State SC Zip Code 29211

Purpose of Disbursement  
PAC management

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 01 / 2015

**Transaction ID : SB21B.4481**

Amount of Each Disbursement this Period

12500.00

Full Name (Last, First, Middle Initial)

**B. J. Warren Tompkins, Inc.**

Mailing Address P.O. Box 11458

City Columbia State SC Zip Code 29211

Purpose of Disbursement  
PAC management

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 02 / 2015

**Transaction ID : SB21B.4542**

Amount of Each Disbursement this Period

12500.00

Full Name (Last, First, Middle Initial)

**C. J. Warren Tompkins, Inc.**

Mailing Address P.O. Box 11458

City Columbia State SC Zip Code 29211

Purpose of Disbursement  
travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 12 / 2015

**Transaction ID : SB21B.4626**

Amount of Each Disbursement this Period

3066.64

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

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

28066.64

**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 Solutions PAC**

Full Name (Last, First, Middle Initial)

**A. J. Warren Tompkins, Inc.**

Mailing Address P.O. Box 11458

City Columbia State SC Zip Code 29211

Purpose of Disbursement  
travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 12 / 2015

Transaction ID : **SB21B.4627**

Amount of Each Disbursement this Period

1449.43

Full Name (Last, First, Middle Initial)

**B. J. Warren Tompkins, Inc.**

Mailing Address P.O. Box 11458

City Columbia State SC Zip Code 29211

Purpose of Disbursement  
PAC management

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 01 / 2015

Transaction ID : **SB21B.4693**

Amount of Each Disbursement this Period

12500.00

Full Name (Last, First, Middle Initial)

**C. Red Sea, LLC**

Mailing Address 4550 Montgomery Avenue, #906

City Bethesda State MD Zip Code 20814

Purpose of Disbursement  
media consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 01 / 2015

Transaction ID : **SB21B.4348**

Amount of Each Disbursement this Period

5000.00

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

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

18949.43

**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 Solutions PAC**

Full Name (Last, First, Middle Initial)

**A. Red Sea, LLC**

Mailing Address 4550 Montgomery Avenue, #906

City Bethesda State MD Zip Code 20814

Purpose of Disbursement  
media consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 16 / 2015

**Transaction ID : SB21B.4373**

Amount of Each Disbursement this Period

15000.00

Full Name (Last, First, Middle Initial)

**B. Red Sea, LLC**

Mailing Address 4550 Montgomery Avenue, #906

City Bethesda State MD Zip Code 20814

Purpose of Disbursement  
travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 21 / 2015

**Transaction ID : SB21B.4524**

Amount of Each Disbursement this Period

1943.99

Full Name (Last, First, Middle Initial)

**C. Red Sea, LLC**

Mailing Address 4550 Montgomery Avenue, #906

City Bethesda State MD Zip Code 20814

Purpose of Disbursement  
media consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 05 / 2015

**Transaction ID : SB21B.4398**

Amount of Each Disbursement this Period

5000.00

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

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

21943.99

**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 Solutions PAC**

Full Name (Last, First, Middle Initial)

**A. Red Sea, LLC**

Mailing Address 4550 Montgomery Avenue, #906

City State Zip Code  
Bethesda MD 20814

Purpose of Disbursement  
media consulting/survey

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	03	/	2015

**Transaction ID : SB21B.4439**

Amount of Each Disbursement this Period

25510.00
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Full Name (Last, First, Middle Initial)

**B. Red Sea, LLC**

Mailing Address 4550 Montgomery Avenue, #906

City State Zip Code  
Bethesda MD 20814

Purpose of Disbursement  
media consulting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	01	/	2015

**Transaction ID : SB21B.4488**

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**C. Red Sea, LLC**

Mailing Address 4550 Montgomery Avenue, #906

City State Zip Code  
Bethesda MD 20814

Purpose of Disbursement  
media consulting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11	/	03	/	2015

**Transaction ID : SB21B.4561**

Amount of Each Disbursement this Period

5000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

35510.00
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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 Solutions PAC**

Full Name (Last, First, Middle Initial)

**A. Red Sea, LLC**

Mailing Address 4550 Montgomery Avenue, #906

City State Zip Code  
Bethesda MD 20814

Purpose of Disbursement  
travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 12 / 2015

**Transaction ID : SB21B.4630**

Amount of Each Disbursement this Period

3452.81

Full Name (Last, First, Middle Initial)

**B. Red Sea, LLC**

Mailing Address 4550 Montgomery Avenue, #906

City State Zip Code  
Bethesda MD 20814

Purpose of Disbursement  
media consulting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 03 / 2015

**Transaction ID : SB21B.4713**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Red Sea, LLC**

Mailing Address 4550 Montgomery Avenue, #906

City State Zip Code  
Bethesda MD 20814

Purpose of Disbursement  
travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 30 / 2015

**Transaction ID : SB21B.4868**

Amount of Each Disbursement this Period

3306.62

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

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

11759.43

**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 Solutions PAC**

Full Name (Last, First, Middle Initial)

**A. Robert Watkins & Company**

Mailing Address 610 S. Boulevard

City Tampa State FL Zip Code 33606

Purpose of Disbursement  
accounting services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.4407**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Robert Watkins & Company**

Mailing Address 610 S. Boulevard

City Tampa State FL Zip Code 33606

Purpose of Disbursement  
accounting services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.4427**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Robert Watkins & Company**

Mailing Address 610 S. Boulevard

City Tampa State FL Zip Code 33606

Purpose of Disbursement  
accounting services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.4447**

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 Solutions PAC**

Full Name (Last, First, Middle Initial)

**A. Robert Watkins & Company**

Mailing Address 610 S. Boulevard

City Tampa State FL Zip Code 33606

Purpose of Disbursement  
accounting services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
10 / 13 / 2015

**Transaction ID : SB21B.4504**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. Robert Watkins & Company**

Mailing Address 610 S. Boulevard

City Tampa State FL Zip Code 33606

Purpose of Disbursement  
accounting services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
11 / 12 / 2015

**Transaction ID : SB21B.4633**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. Robert Watkins & Company**

Mailing Address 610 S. Boulevard

City Tampa State FL Zip Code 33606

Purpose of Disbursement  
accounting services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
12 / 11 / 2015

**Transaction ID : SB21B.4757**

Amount of Each Disbursement this Period

2500.00

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

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

7500.00

**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 Solutions PAC**

Full Name (Last, First, Middle Initial)

**A. Robert Watkins & Company**

Mailing Address 610 S. Boulevard

City Tampa State FL Zip Code 33606

Purpose of Disbursement  
accounting services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 30 / 2015

Transaction ID : **SB21B.4869**

Amount of Each Disbursement this Period

1192.78

Full Name (Last, First, Middle Initial)

**B. Target Enterprises, LLC**

Mailing Address 15260 Ventura Blvd.  
Suite 1240

City Sherman Oaks State CA Zip Code 91403

Purpose of Disbursement  
media placement-not disseminated

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 24 / 2015

Transaction ID : **SB21B.4522**

Amount of Each Disbursement this Period

5586336.70

Full Name (Last, First, Middle Initial)

**C. Target Enterprises, LLC**

Mailing Address 15260 Ventura Blvd.  
Suite 1240

City Sherman Oaks State CA Zip Code 91403

Purpose of Disbursement  
online advertising-non advocacy

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 24 / 2015

Transaction ID : **SB21B.4843**

Amount of Each Disbursement this Period

50000.00

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

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

5637529.48

**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 Solutions PAC**

Full Name (Last, First, Middle Initial)

**A. Target Enterprises, LLC**

Mailing Address 15260 Ventura Blvd.  
Suite 1240

City Sherman Oaks State CA Zip Code 91403

Purpose of Disbursement  
delivery

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 24 / 2015

Transaction ID : **SB21B.4853**

Amount of Each Disbursement this Period

48.69

Full Name (Last, First, Middle Initial)

**B. Target Enterprises, LLC**

Mailing Address 15260 Ventura Blvd.  
Suite 1240

City Sherman Oaks State CA Zip Code 91403

Purpose of Disbursement  
online advertising-non advocacy

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 04 / 2015

Transaction ID : **SB21B.4393**

Amount of Each Disbursement this Period

25000.00

Full Name (Last, First, Middle Initial)

**C. Target Enterprises, LLC**

Mailing Address 15260 Ventura Blvd.  
Suite 1240

City Sherman Oaks State CA Zip Code 91403

Purpose of Disbursement  
online advertising-non advocacy

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.4618**

Amount of Each Disbursement this Period

30000.00

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

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

55048.69

**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 Solutions PAC**

Full Name (Last, First, Middle Initial)

**A. Target Enterprises, LLC**

Mailing Address 15260 Ventura Blvd.  
Suite 1240

City Sherman Oaks State CA Zip Code 91403

Purpose of Disbursement  
media/online advertising-not disseminated

Candidate Name

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
11		24		2015

**Transaction ID : SB21B.4700**

Amount of Each Disbursement this Period

1263964.52
------------

Full Name (Last, First, Middle Initial)

**B. Target Enterprises, LLC**

Mailing Address 15260 Ventura Blvd.  
Suite 1240

City Sherman Oaks State CA Zip Code 91403

Purpose of Disbursement  
media/online-not disseminated

Candidate Name

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
12		18		2015

**Transaction ID : SB21B.5192**

Amount of Each Disbursement this Period

1372595.42
------------

Full Name (Last, First, Middle Initial)

**C. The Bank of Tampa**

Mailing Address 601 Bayshore Blvd.

City Tampa State FL Zip Code 33606

Purpose of Disbursement  
deposit supplies

Candidate Name

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
07		01		2015

**Transaction ID : SB21B.4389**

Amount of Each Disbursement this Period

54.37
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

2636614.31
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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 Solutions PAC**

Full Name (Last, First, Middle Initial)

**A. The Bank of Tampa**

Mailing Address 601 Bayshore Blvd.

City Tampa State FL Zip Code 33606

Purpose of Disbursement  
service charge

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.4523**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. The Bank of Tampa**

Mailing Address 601 Bayshore Blvd.

City Tampa State FL Zip Code 33606

Purpose of Disbursement  
service charge

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.4394**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. The Bank of Tampa**

Mailing Address 601 Bayshore Blvd.

City Tampa State FL Zip Code 33606

Purpose of Disbursement  
service charge

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.4525**

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 Solutions PAC**

Full Name (Last, First, Middle Initial)

**A. The Bank of Tampa**

Mailing Address 601 Bayshore Blvd.

City Tampa State FL Zip Code 33606

Purpose of Disbursement  
service charge

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.4452**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. The Bank of Tampa**

Mailing Address 601 Bayshore Blvd.

City Tampa State FL Zip Code 33606

Purpose of Disbursement  
service charge

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.4478**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. The Bank of Tampa**

Mailing Address 601 Bayshore Blvd.

City Tampa State FL Zip Code 33606

Purpose of Disbursement  
service charge

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.4520**

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 Solutions PAC**

Full Name (Last, First, Middle Initial)

**A. The Bank of Tampa**

Mailing Address 601 Bayshore Blvd.

City Tampa State FL Zip Code 33606

Purpose of Disbursement  
service charge

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2015

**Transaction ID : SB21B.4613**

Amount of Each Disbursement this Period

15.00

Full Name (Last, First, Middle Initial)

**B. The Bank of Tampa**

Mailing Address 601 Bayshore Blvd.

City Tampa State FL Zip Code 33606

Purpose of Disbursement  
service charge

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 02 / 2015

**Transaction ID : SB21B.4544**

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

**C. The Bank of Tampa**

Mailing Address 601 Bayshore Blvd.

City Tampa State FL Zip Code 33606

Purpose of Disbursement  
service charge

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 02 / 2015

**Transaction ID : SB21B.4614**

Amount of Each Disbursement this Period

15.00

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

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

50.00

**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 Solutions PAC**

Full Name (Last, First, Middle Initial)

**A. The Bank of Tampa**

Mailing Address 601 Bayshore Blvd.

City Tampa State FL Zip Code 33606

Purpose of Disbursement  
service charge

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 03 / 2015

**Transaction ID : SB21B.4568**

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

**B. The Bank of Tampa**

Mailing Address 601 Bayshore Blvd.

City Tampa State FL Zip Code 33606

Purpose of Disbursement  
service charge

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 12 / 2015

**Transaction ID : SB21B.4637**

Amount of Each Disbursement this Period

15.00

Full Name (Last, First, Middle Initial)

**C. The Bank of Tampa**

Mailing Address 601 Bayshore Blvd.

City Tampa State FL Zip Code 33606

Purpose of Disbursement  
service charge

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 20 / 2015

**Transaction ID : SB21B.4689**

Amount of Each Disbursement this Period

15.00

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

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

50.00

**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 Solutions PAC**

Full Name (Last, First, Middle Initial)

**A. The Bank of Tampa**

Mailing Address 601 Bayshore Blvd.

City Tampa State FL Zip Code 33606

Purpose of Disbursement service charge

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 24 / 2015

Transaction ID : **SB21B.4699**

Amount of Each Disbursement this Period: 20.00

Category/Type

Full Name (Last, First, Middle Initial)

**B. The Bank of Tampa**

Mailing Address 601 Bayshore Blvd.

City Tampa State FL Zip Code 33606

Purpose of Disbursement service charge

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 01 / 2015

Transaction ID : **SB21B.4704**

Amount of Each Disbursement this Period: 20.00

Category/Type

Full Name (Last, First, Middle Initial)

**C. The Bank of Tampa**

Mailing Address 601 Bayshore Blvd.

City Tampa State FL Zip Code 33606

Purpose of Disbursement service charge

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 08 / 2015

Transaction ID : **SB21B.4747**

Amount of Each Disbursement this Period: 15.00

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 55.00

**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 Solutions PAC**

Full Name (Last, First, Middle Initial)

**A. The Bank of Tampa**

Mailing Address 601 Bayshore Blvd.

City Tampa State FL Zip Code 33606

Purpose of Disbursement  
service charge

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 09 / 2015

Transaction ID : **SB21B.4752**

Amount of Each Disbursement this Period

15.00

Full Name (Last, First, Middle Initial)

**B. The Bank of Tampa**

Mailing Address 601 Bayshore Blvd.

City Tampa State FL Zip Code 33606

Purpose of Disbursement  
service charge

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 10 / 2015

Transaction ID : **SB21B.4755**

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

**C. The Bank of Tampa**

Mailing Address 601 Bayshore Blvd.

City Tampa State FL Zip Code 33606

Purpose of Disbursement  
service charge

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 14 / 2015

Transaction ID : **SB21B.4769**

Amount of Each Disbursement this Period

15.00

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

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

50.00

**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 Solutions PAC**

Full Name (Last, First, Middle Initial)

**A. The Bank of Tampa**

Mailing Address 601 Bayshore Blvd.

City Tampa State FL Zip Code 33606

Purpose of Disbursement  
service charge

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 15 / 2015

**Transaction ID : SB21B.4779**

Amount of Each Disbursement this Period

15.00

Full Name (Last, First, Middle Initial)

**B. The Bank of Tampa**

Mailing Address 601 Bayshore Blvd.

City Tampa State FL Zip Code 33606

Purpose of Disbursement  
service charge

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 15 / 2015

**Transaction ID : SB21B.4810**

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

**C. The Bank of Tampa**

Mailing Address 601 Bayshore Blvd.

City Tampa State FL Zip Code 33606

Purpose of Disbursement  
service charge

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 18 / 2015

**Transaction ID : SB21B.4805**

Amount of Each Disbursement this Period

20.00

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

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

55.00

**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 Solutions PAC**

Full Name (Last, First, Middle Initial)

**A. The Bank of Tampa**

Mailing Address 601 Bayshore Blvd.

City Tampa State FL Zip Code 33606

Purpose of Disbursement  
service charge

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 22 / 2015

Transaction ID : **SB21B.4809**

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

**B. The Bank of Tampa**

Mailing Address 601 Bayshore Blvd.

City Tampa State FL Zip Code 33606

Purpose of Disbursement  
service charge

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 22 / 2015

Transaction ID : **SB21B.4827**

Amount of Each Disbursement this Period

15.00

Full Name (Last, First, Middle Initial)

**C. The Bank of Tampa**

Mailing Address 601 Bayshore Blvd.

City Tampa State FL Zip Code 33606

Purpose of Disbursement  
service charge

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 29 / 2015

Transaction ID : **SB21B.4859**

Amount of Each Disbursement this Period

15.00

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

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

50.00

**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 Solutions PAC**

Full Name (Last, First, Middle Initial)

**A. The Bank of Tampa**

Mailing Address 601 Bayshore Blvd.

City Tampa State FL Zip Code 33606

Purpose of Disbursement  
service charge

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 29 / 2015

Transaction ID : **SB21B.4872**

Amount of Each Disbursement this Period

15.00

Full Name (Last, First, Middle Initial)

**B. The Bank of Tampa**

Mailing Address 601 Bayshore Blvd.

City Tampa State FL Zip Code 33606

Purpose of Disbursement  
service charge

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 30 / 2015

Transaction ID : **SB21B.4873**

Amount of Each Disbursement this Period

15.00

Full Name (Last, First, Middle Initial)

**C. The Bank of Tampa**

Mailing Address 601 Bayshore Blvd.

City Tampa State FL Zip Code 33606

Purpose of Disbursement  
service charge

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 30 / 2015

Transaction ID : **SB21B.4874**

Amount of Each Disbursement this Period

15.00

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

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

45.00

**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 Solutions PAC**

Full Name (Last, First, Middle Initial)

**A. The Bank of Tampa**

Mailing Address 601 Bayshore Blvd.

City Tampa State FL Zip Code 33606

Purpose of Disbursement  
service charge

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 31 / 2015

**Transaction ID : SB21B.4875**

Amount of Each Disbursement this Period

15.00

Full Name (Last, First, Middle Initial)

**B. The Bank of Tampa**

Mailing Address 601 Bayshore Blvd.

City Tampa State FL Zip Code 33606

Purpose of Disbursement  
service charge

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 31 / 2015

**Transaction ID : SB21B.4876**

Amount of Each Disbursement this Period

15.00

Full Name (Last, First, Middle Initial)

**C. The Gula Graham Group**

Mailing Address 499 S. Capitol Street, S.W., #420

City Washington State DC Zip Code 20003

Purpose of Disbursement  
fundraising consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 01 / 2015

**Transaction ID : SB21B.4296**

Amount of Each Disbursement this Period

5000.00

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

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

5030.00

**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 Solutions PAC**

Full Name (Last, First, Middle Initial)

**A. The Gula Graham Group**

Mailing Address 499 S. Capitol Street, S.W., #420

City Washington State DC Zip Code 20003

Purpose of Disbursement fundraising consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 28 / 2015

Transaction ID : SB21B.4380

Amount of Each Disbursement this Period

91000.00

Full Name (Last, First, Middle Initial)

**B. The Gula Graham Group**

Mailing Address 499 S. Capitol Street, S.W., #420

City Washington State DC Zip Code 20003

Purpose of Disbursement fundraising consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2015

Transaction ID : SB21B.4385

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. The Gula Graham Group**

Mailing Address 499 S. Capitol Street, S.W., #420

City Washington State DC Zip Code 20003

Purpose of Disbursement fundraising 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 / 01 / 2015

Transaction ID : SB21B.4430

Amount of Each Disbursement this Period

5000.00

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

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

101000.00

**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 Solutions PAC**

Full Name (Last, First, Middle Initial)

**A. The Gula Graham Group**

Mailing Address 499 S. Capitol Street, S.W., #420

City Washington State DC Zip Code 20003

Purpose of Disbursement  
travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 17 / 2015

**Transaction ID : SB21B.4456**

Amount of Each Disbursement this Period

1839.48

Full Name (Last, First, Middle Initial)

**B. The Gula Graham Group**

Mailing Address 499 S. Capitol Street, S.W., #420

City Washington State DC Zip Code 20003

Purpose of Disbursement  
fundraising consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 01 / 2015

**Transaction ID : SB21B.4480**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. The Gula Graham Group**

Mailing Address 499 S. Capitol Street, S.W., #420

City Washington State DC Zip Code 20003

Purpose of Disbursement  
travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 08 / 2015

**Transaction ID : SB21B.4498**

Amount of Each Disbursement this Period

65.28

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

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

6904.76

**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 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 Solutions PAC**

Full Name (Last, First, Middle Initial)

**A. The Gula Graham Group**

Mailing Address 499 S. Capitol Street, S.W., #420

City Washington State DC Zip Code 20003

Purpose of Disbursement fundraising consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 02 / 2015

**Transaction ID : SB21B.4540**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. The Gula Graham Group**

Mailing Address 499 S. Capitol Street, S.W., #420

City Washington State DC Zip Code 20003

Purpose of Disbursement travel/delivery

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 19 / 2015

**Transaction ID : SB21B.4658**

Amount of Each Disbursement this Period

3210.08

Full Name (Last, First, Middle Initial)

**C. The Gula Graham Group**

Mailing Address 499 S. Capitol Street, S.W., #420

City Washington State DC Zip Code 20003

Purpose of Disbursement fundraising consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 01 / 2015

**Transaction ID : SB21B.4694**

Amount of Each Disbursement this Period

5000.00

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

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

13210.08

# 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 Solutions PAC**

Full Name (Last, First, Middle Initial)

### A. ZDB, Inc.

Mailing Address 131 Madeira Avenue, #2nd Floor

City State Zip Code  
Coral Gables FL 33134

Purpose of Disbursement  
fundraising consulting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	28	/	2015

Transaction ID : SB21B.4381

Amount of Each Disbursement this Period

37500.00
----------

Full Name (Last, First, Middle Initial)

### B.

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

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

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Disbursement this Period

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

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

37500.00
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9090743.78
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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 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 Solutions PAC**

Full Name (Last, First, Middle Initial)

### A. Free Speech PAC

Mailing Address 5730 Corporate Way, #214

City State Zip Code  
West Palm Beach FL 33407

Purpose of Disbursement  
contribution refund

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	10	/	2015

Transaction ID : SB28A.4751

Amount of Each Disbursement this Period

30000.00
----------

Full Name (Last, First, Middle Initial)

### B.

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

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

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Disbursement this Period

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

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

30000.00
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30000.00
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**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 94 OF 107
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Conservative Solutions PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Chris Mottola Consulting, Inc.</b>	Nature of Debt (Purpose): media production
Mailing Address 4130 Cahuenga Blvd., 230a	
City State Zip Code North Hollywood CA 91602	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	<b>Transaction ID : SD10.5297</b>	
Amount Incurred This Period <input type="text" value="19312.50"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="19312.50"/>

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) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="19312.50"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text" value="19312.50"/>
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="19312.50"/>

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Conservative Solutions PAC</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00541292
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>BASK Digital Media, LLC</b>	Date of Public Distribution/Dissemination <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>11 / 14 / 2015</b>
Mailing Address 15260 Ventura Blvd., #1240	Amount <span style="margin-left: 20px;">1000.00</span>
City State Zip Code Sherman Oaks CA 91403	<b>Transaction ID : SE.4653</b> Date of Disbursement or Obligation <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>11 / 05 / 2015</b>
Purpose of Expenditure video production	Category/Type
Name of Federal Candidate Marco Rubio	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>IA</u>
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">1044436.54</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>BASK Digital Media, LLC</b>	Date of Public Distribution/Dissemination <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>12 / 08 / 2015</b>
Mailing Address 15260 Ventura Blvd., #1240	Amount <span style="margin-left: 20px;">1000.00</span>
City State Zip Code Sherman Oaks CA 91403	<b>Transaction ID : SE.4742</b> Date of Disbursement or Obligation <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>12 / 03 / 2015</b>
Purpose of Expenditure video production	Category/Type
Name of Federal Candidate Marco Rubio	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>IA</u>
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">6169426.12</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="margin-left: 20px;">2000.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="margin-left: 20px;"></span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="margin-left: 20px;"></span>

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.

*Nancy H. Watkins*  
Signature

[Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
**01 / 31 / 2016**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Conservative Solutions PAC</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00541292
--	--

Check if  24-hour report  48-hour report  New report  Amends report filed on  /  /

Full Name of Payee <b>Chris Mottola Consulting, Inc.</b> <b>[MEMO ITEM]</b>		Date of Public Distribution/Dissemination <input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYYYY"/> 12 / 31 / 2015	
Mailing Address 4130 Cahuenga Blvd., 230a		Amount <input type="text" value="91312.50"/>	
City North Hollywood	State CA	Zip Code 91602	<b>Transaction ID : SE.5318</b>
Purpose of Expenditure media production	Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYYYY"/>	
Name of Federal Candidate Marco Rubio		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought <input type="text" value="0.00"/>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>Chris Mottola Consulting, Inc.</b>		Date of Public Distribution/Dissemination <input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYYYY"/> 10 / 30 / 2015	
Mailing Address 4130 Cahuenga Blvd., 230a		Amount <input type="text" value="36009.00"/>	
City North Hollywood	State CA	Zip Code 91602	<b>Transaction ID : SE.4545</b>
Purpose of Expenditure media production and licensing costs	Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYYYY"/> 11 / 02 / 2015	
Name of Federal Candidate Marco Rubio		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought <input type="text" value="996735.81"/>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<input type="text" value="36009.00"/>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<input type="text"/>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Nancy H. Watkins [Electronically Filed] Date  /  /   
01 / 31 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Conservative Solutions PAC
FEC IDENTIFICATION NUMBER
C C00541292
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Chris Mottola Consulting, Inc.
Mailing Address
4130 Cahuenga Blvd., 230a
City
North Hollywood State
CA Zip Code
91602
Purpose of Expenditure
media production
Category/Type
Name of Federal Candidate
Marco Rubio
Support
Office Sought:
President
Disbursement For:
Primary
Calendar Year-To-Date
Per Election for Office Sought
6168426.12
Date of Public Distribution/Dissemination
11 / 29 / 2015
Amount
8372.50
Transaction ID : SE.4703
Date of Disbursement or Obligation
12 / 01 / 2015

Full Name of Payee
Chris Mottola Consulting, Inc.
Mailing Address
4130 Cahuenga Blvd., 230a
City
North Hollywood State
CA Zip Code
91602
Purpose of Expenditure
media production
Category/Type
Name of Federal Candidate
Marco Rubio
Support
Office Sought:
President
Disbursement For:
Primary
Calendar Year-To-Date
Per Election for Office Sought
6213648.62
Date of Public Distribution/Dissemination
12 / 14 / 2015
Amount
14222.50
Transaction ID : SE.4776
Date of Disbursement or Obligation
12 / 15 / 2015

(a) SUBTOTAL of Itemized Independent Expenditures..... 22595.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....
(c) TOTAL Independent Expenditures.....

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Signature Nancy H. Watkins [Electronically Filed] Date 01 / 31 / 2016

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Conservative Solutions PAC</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00541292
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>Chris Mottola Consulting, Inc.</b>	Date of Public Distribution/Dissemination <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>12 / 22 / 2015</b>
Mailing Address 4130 Cahuenga Blvd., 230a	Amount <span style="margin-left: 20px;">24232.50</span>
City North Hollywood State CA Zip Code 91602	<b>Transaction ID : SE.4806</b> Date of Disbursement or Obligation <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>12 / 22 / 2015</b>
Purpose of Expenditure media production Category/Type	Name of Federal Candidate <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Marco Rubio Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA District: _____
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">6237881.12</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Chris Mottola Consulting, Inc.</b>	Date of Public Distribution/Dissemination <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>12 / 28 / 2015</b>
Mailing Address 4130 Cahuenga Blvd., 230a	Amount <span style="margin-left: 20px;">4550.00</span>
City North Hollywood State CA Zip Code 91602	<b>Transaction ID : SE.4829</b> Date of Disbursement or Obligation <span style="margin-left: 20px;">M M M / D D D / Y Y Y Y Y Y</span> <b>12 / 28 / 2015</b>
Purpose of Expenditure media production Category/Type	Name of Federal Candidate <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Marco Rubio Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NH District: _____
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;">1050584.96</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="margin-left: 20px;">28782.50</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Nancy H. Watkins* [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y  
01 / 31 / 2016

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Conservative Solutions PAC</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00541292
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>Cold Spark Media, Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 29 / 2015
Mailing Address 307 Fourth Avenue, #920	Amount <span style="border: 1px solid black; padding: 2px;">3500.00</span>
City State Zip Code Pittsburgh PA 15222	<b>Transaction ID : SE.4865</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 03 / 2015
Purpose of Expenditure video production	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>
Name of Federal Candidate Marco Rubio	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: IA
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1043436.54</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>Sam Holland Photography</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 10 / 2015
Mailing Address 1531 Wheeler Road	Amount <span style="border: 1px solid black; padding: 2px;">512.50</span>
City State Zip Code Columbia SC 29204	<b>Transaction ID : SE.4621</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 03 / 2015
Purpose of Expenditure photography	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>
Name of Federal Candidate Marco Rubio	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: IA
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1039936.54</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">4012.50</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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.

*Nancy H. Watkins*  
Signature

[Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
01 / 31 / 2016

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Conservative Solutions PAC</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00541292
--	--

Check if  24-hour report  48-hour report  New report  Amends report filed on  /  /

Full Name of Payee <b>Target Enterprises, LLC</b>		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 15260 Ventura Blvd. Suite 1240		Amount <input type="text"/>	
City Sherman Oaks	State CA	Zip Code 91403	<b>Transaction ID : SE.4839</b>
Purpose of Expenditure media placement	Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>	
Name of Federal Candidate Marco Rubio		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IA</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>Target Enterprises, LLC</b>		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 15260 Ventura Blvd. Suite 1240		Amount <input type="text"/>	
City Sherman Oaks	State CA	Zip Code 91403	<b>Transaction ID : SE.4844</b>
Purpose of Expenditure media placement	Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>	
Name of Federal Candidate Marco Rubio		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IA</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<input type="text"/>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<input type="text"/>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Nancy H. Watkins [Electronically Filed] Date  /  /

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Conservative Solutions PAC
FEC IDENTIFICATION NUMBER
C C00541292
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Target Enterprises, LLC
Mailing Address
15260 Ventura Blvd.
Suite 1240
City State Zip Code
Sherman Oaks CA 91403
Purpose of Expenditure
online advertising
Category/Type

Date of Public Distribution/Dissemination
11 / 10 / 2015
Amount
42688.23
Transaction ID : SE.4615
Date of Disbursement or Obligation
11 / 03 / 2015

Name of Federal Candidate
Marco Rubio
Support
Office Sought:
President
State: IA
Calendar Year-To-Date
Per Election for Office Sought
1039424.04

Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
Target Enterprises, LLC
Mailing Address
15260 Ventura Blvd.
Suite 1240
City State Zip Code
Sherman Oaks CA 91403
Purpose of Expenditure
media placement
Category/Type

Date of Public Distribution/Dissemination
11 / 29 / 2015
Amount
1192890.33
Transaction ID : SE.4701
Date of Disbursement or Obligation
11 / 24 / 2015

Name of Federal Candidate
Marco Rubio
Support
Office Sought:
President
State: IA
Calendar Year-To-Date
Per Election for Office Sought
2237326.87

Disbursement For:
Primary
General
Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 1235578.56, (b) SUBTOTAL of Unitemized Independent Expenditures, (c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Nancy H. Watkins
[Electronically Filed]
Date 01 / 31 / 2016
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Conservative Solutions PAC
FEC IDENTIFICATION NUMBER
C C00541292
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Target Enterprises, LLC
Mailing Address
15260 Ventura Blvd.
Suite 1240
City State Zip Code
Sherman Oaks CA 91403
Purpose of Expenditure
online advertising
Category/Type

Date of Public Distribution/Dissemination
11 / 30 / 2015
Amount
91197.00
Transaction ID : SE.4702
Date of Disbursement or Obligation
11 / 24 / 2015

Name of Federal Candidate
Marco Rubio
Support
Office Sought: President
State: IA
Calendar Year-To-Date
Per Election for Office Sought
2328523.87

Disbursement For: Primary
2016

Full Name of Payee
Target Enterprises, LLC
Mailing Address
15260 Ventura Blvd.
Suite 1240
City State Zip Code
Sherman Oaks CA 91403
Purpose of Expenditure
media placement
Category/Type

Date of Public Distribution/Dissemination
12 / 03 / 2015
Amount
14280.00
Transaction ID : SE.4718
Date of Disbursement or Obligation
11 / 24 / 2015

Name of Federal Candidate
Marco Rubio
Support
Office Sought: President
State: IA
Calendar Year-To-Date
Per Election for Office Sought
2342803.87

Disbursement For: Primary
2016

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 105477.00

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.

Nancy H. Watkins
[Electronically Filed]
Date 01 / 31 / 2016
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Conservative Solutions PAC
FEC IDENTIFICATION NUMBER
C C00541292
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Target Enterprises, LLC
Mailing Address
15260 Ventura Blvd.
Suite 1240
City
Sherman Oaks State
CA Zip Code
91403
Purpose of Expenditure
media placement
Category/
Type
Name of Federal Candidate
Marco Rubio
Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
3526419.52

Date of Public Distribution/Dissemination
12 / 07 / 2015
Amount
1183615.65
Transaction ID : SE.4719
Date of Disbursement or Obligation
11 / 24 / 2015
Office Sought:
House District:
Senate State: IA
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
Target Enterprises, LLC
Mailing Address
15260 Ventura Blvd.
Suite 1240
City
Sherman Oaks State
CA Zip Code
91403
Purpose of Expenditure
media placement
Category/
Type
Name of Federal Candidate
Marco Rubio
Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
3616096.56

Date of Public Distribution/Dissemination
12 / 07 / 2015
Amount
89677.04
Transaction ID : SE.4720
Date of Disbursement or Obligation
11 / 24 / 2015
Office Sought:
House District:
Senate State: IA
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 1273292.69
(b) SUBTOTAL of Unitemized Independent Expenditures .....
(c) TOTAL Independent Expenditures.....

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Signature Nancy H. Watkins [Electronically Filed] Date 01 / 31 / 2016



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Conservative Solutions PAC
FEC IDENTIFICATION NUMBER
C C00541292
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Target Enterprises, LLC
Mailing Address
15260 Ventura Blvd.
Suite 1240
City State Zip Code
Sherman Oaks CA 91403
Purpose of Expenditure
media placement
Category/Type

Date of Public Distribution/Dissemination
12 / 21 / 2015
Amount
1030804.55
Transaction ID : SE.4811
Date of Disbursement or Obligation
11 / 24 / 2015

Name of Federal Candidate
Marco Rubio
Support
Office Sought: President
State: IA
Calendar Year-To-Date
Per Election for Office Sought
5932765.10

Disbursement For: Primary
2016

Full Name of Payee
Target Enterprises, LLC
Mailing Address
15260 Ventura Blvd.
Suite 1240
City State Zip Code
Sherman Oaks CA 91403
Purpose of Expenditure
online advertising
Category/Type

Date of Public Distribution/Dissemination
12 / 21 / 2015
Amount
141309.53
Transaction ID : SE.4812
Date of Disbursement or Obligation
11 / 24 / 2015

Name of Federal Candidate
Marco Rubio
Support
Office Sought: President
State: IA
Calendar Year-To-Date
Per Election for Office Sought
6074074.63

Disbursement For: Primary
2016

(a) SUBTOTAL of Itemized Independent Expenditures 1172114.08
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Nancy H. Watkins
[Electronically Filed]
Date 01 / 31 / 2016
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Conservative Solutions PAC
FEC IDENTIFICATION NUMBER
C C00541292
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Target Enterprises, LLC
Mailing Address
15260 Ventura Blvd.
Suite 1240
City
Sherman Oaks State
CA Zip Code
91403
Purpose of Expenditure
online advertising
Category/Type
Name of Federal Candidate
Marco Rubio
Support
Office Sought:
President
State: IA
Calendar Year-To-Date
Per Election for Office Sought
6160053.62

Date of Public Distribution/Dissemination
12 / 28 / 2015
Amount
85978.99
Transaction ID : SE.4845
Date of Disbursement or Obligation
11 / 24 / 2015
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
Target Enterprises, LLC
Mailing Address
15260 Ventura Blvd.
Suite 1240
City
Sherman Oaks State
CA Zip Code
91403
Purpose of Expenditure
online advertising
Category/Type
Name of Federal Candidate
Marco Rubio
Support
Office Sought:
President
State: IA
Calendar Year-To-Date
Per Election for Office Sought
6199426.12

Date of Public Distribution/Dissemination
12 / 15 / 2015
Amount
30000.00
Transaction ID : SE.4753
Date of Disbursement or Obligation
12 / 10 / 2015
Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 115978.99
(b) SUBTOTAL of Unitemized Independent Expenditures .....
(c) TOTAL Independent Expenditures.....

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Signature Nancy H. Watkins [Electronically Filed] Date 01 / 31 / 2016

