

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

NAME OF COMMITTEE (In Full) <b>THE CONSERVATIVE STRIKEFORCE</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00457291
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 M / D D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>CLIENT FIRST CONSULTING GROUP LLC</b> <b>[MEMO ITEM]</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 04 / 02 / 2014
Mailing Address 385 AVERY LN	Amount <span style="border: 1px solid black; padding: 2px;">4026.78</span>
City State Zip Code MEDINA OH 44256	<b>Transaction ID : SE.104848</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 04 / 02 / 2014
Purpose of Expenditure VOTER CONTACT CALLS OVER SERVERAL WEEKS	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate MARK J WARNER	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: VA
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4832.13</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>CLIENT FIRST CONSULTING GROUP LLC</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 04 / 02 / 2014
Mailing Address 385 AVERY LN	Amount <span style="border: 1px solid black; padding: 2px;">344.39</span>
City State Zip Code MEDINA OH 44256	<b>Transaction ID : SE.83288</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 04 / 14 / 2014
Purpose of Expenditure VOTER CONTACT CALLS OVER SERVERAL WEEKS	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate MARK BEGICH	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: AK
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1170.91</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">344.39</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.

*SCOTT B MACKENZIE*

Signature \_\_\_\_\_ Date M M M / D D D / Y Y Y Y Y Y 07 / 11 / 2015

[Electronically Filed]