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09/20/2016 16 : 22

PAGE 1 / 25

FEC A	REPORT	BURSEI	MENT	S		Office Use Only	I
1. NAME OF 7 COMMITTEE (in full)	TYPE OR PRINT V		ample: If typiner the lines.	ng, type	12FE4M5		
COURAGEOUS CONS	ERVATIVES	PAC					I
	5 Halifax Ct						
ADDRESS (number and street)							
Check if different than previously reported. (ACC)	Marlton				NJ	08053	
2. FEC IDENTIFICATION NU	MBER V	CITY 🔺		S		ZIP COE	DE 🔺
C C00587022		3. IS THIS REPORT	~	NEW N) OR	AN (A)	IENDED	
4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2) Mar 20 (M3)		May 20 (M5) Jun 20 (M6)		20 (M8)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12)
(a) Quarterly Reports:		Apr 20 (M4)	Ē.	Jul 20 (M7)	Oct	20 (M10)	(Non-Election Year Only) Jan 31 (YE)
April 15 Quarterly Report (Q1	l) (c) 12-Day		Primary (12F	. ,	General		Runoff (12R)
July 15 Quarterly Report (Q2	DDE-Ele		Convention (Special (
October 15 Quarterly Report (Q3			Convention	120)		120)	
January 31 Year-End Report (YE	Ξ)	Election on	M M /	D D /	Y Y Y Y Y	in the State of	
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST- E Report f		General (300	G)	Runoff (3	30R)	Special (30S)
Termination Report (TER)		Election on	M = M /	D D /	Y Y Y Y Y	in the State of	
5. Covering Period 08	/ D D / Y 01	2016	through	M M 08	/ D D / 31	2016	
I certify that I have examined this Type or Print Name of Treasurer		e best of my kno	wledge and	belief it is true	e, correct and	d complete.	
Signature of Treasurer	eth Curtis		[Electronicall	y Filed] Da	ate 09	/ D D / 20	2016
NOTE: Submission of false, erroned	ous, or incomplete in	nformation may s	ubject the per	son signing th	is Report to th	ne penalties of 2 U	.S.C. §437g.
Office Use Only						FEC FORI Rev. 12/20	

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

•	FEC Form 3X (Rev. 02/2003)	OF RECEIPTS AND DISBURSEMENTS	Page 2
V	/rite or Type Committee Name		
(COURAGEOUS CONSERVATIVE	SPAC	
R	eport Covering the Period: From:	01 Y Y Y Y Y 01 2016 To:	M = M / D = D / Y = Y = Y = Y Y 08 31 2016
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2016		7168.24
	(b) Cash on Hand at Beginning of Reporting Period	3422.29	
	(c) Total Receipts (from Line 19)	10243.46	250780.21
	 (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) 	13665.75	257948.45
7.	Total Disbursements (from Line 31)	11275.64	255558.34
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	2390.11	2390.11
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	177581.35	

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

Image#	201	6092	09031	012226
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DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

COURAGEOUS CONSERVATIVES PAC

Report Covering the Period: From:		o: 08 / 08 / 2016
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	0.00	111712.00
(i) Itemized (use Schedule A)	7 7	111712.00
	230.00	9741.48
(ii) Unitemized	230.00	3741.40
(iii) TOTAL (add	230.00	121453.48
Lines 11(a)(i) and (ii)▶	230.00	
(h) Political Party Committees	0.00	0.00
(b) Political Party Committees(c) Other Political Committees		
(c) Other Political Committees (such as PACs)	0.00	2500.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)	230.00	123953.48
2. Transfers From Affiliated/Other	7 7	
Party Committees	0.00	0.00
	7 7	7 7 7
B. All Loans Received	10013.46	120581.35
	7 7	7 7 7
1 Joan Banaymanta Bassiyad	0.00	0.00
 Loan Repayments Received Offsets To Operating Expenditures 	7 7 7	
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	6245.38
6. Refunds of Contributions Made	7 7 7	
to Federal Candidates and Other		
Political Committees	0.00	0.00
7. Other Federal Receipts	7 7	
(Dividends, Interest, etc.)	0.00	0.00
3. Transfers from Non-Federal and Levin Funds	7 7 7	
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
	7 7	
(b) Levin Funds (from Schedule H5)	0.00	0.00
	(7)	
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
(,, , , , , , , , , , , , , , , , , , ,		
9. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))►	10243.46	250780.21
L		
). Total Federal Receipts		

10243.46

20. Total Federal Receipts (subtract Line 18(c) from Line 19)......►

250780.21

Page 3

I

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)	of Disbursements	Page 4
II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1. 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	3762.18	68607.67
 (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) 	3762.18	68607.67
2. Transfers to Affiliated/Other Party Committees	0.00	0.00
3. Contributions to Federal Candidates/Committees and Other Political Committees	0.00	0.00
4. Independent Expenditures		
(use Schedule E) 5. Coordinated Party Expenditures (2 U.S.C. §441a(d))	7513.46	186950.67
(use Schedule F)	0.00	0.00
6. Loan Repayments Made	0.00	0.00
 Loans Made Refunds of Contributions To: 	0.00	0.00
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds		
(add Lines 28(a), (b), and (c))►	0.00	0.00
9. Other Disbursements	0.00	0.00
 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
. Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	11275.64	255558.34
 Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) 		
from Line 31)	11275.64	255558.34

L

DETAILED SUMMARY PAGE

of Disbursements

II. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
 Total Contributions (other than loans) (from Line 11(d), page 3) 	230.00	123953.48
 Total Contribution Refunds (from Line 28(d)) 	0.00	0.00
 Net Contributions (other than loans) (subtract Line 34 from Line 33) 	230.00	123953.48
add Line 21(a)(i) and Line 21(b))►	3762.18	68607.67
. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	6245.38
. Net Operating Expenditures (subtract Line 37 from Line 36)	3762.18	62362.29

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 6 OF

25

IIEWIZE	DRECEIPTS		for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
				erson for the purpose of soliciting contributions to solicit contributions from such committee.
	F COMMITTEE (In Full) RAGEOUS CONSERV	ATIVES PAG	0	
A. Christo Mailing A City Dallas FEC ID r federal p Name of Self-emp Receipt I		State TX C Occupation Investor Aggregate	Zip Code 75205 Year-to-Date ▼ 120581.35	Date of Receipt 08 04 2016 Transaction ID : SA13.4918 Amount of Each Receipt this Period 10013.46 Memo Item
B. Mailing A City FEC ID r federal p Name of Receipt I Print	number of contributing olitical committee. Employer	State C Occupation Aggregate	Zip Code Year-to-Date ▼	Date of Receipt M M D D Y Y Y Y Y Amount of Each Receipt this Period Memo Item
C. Mailing A City FEC ID r federal p Name of Receipt I Print	number of contributing olitical committee. Employer	State C Occupation Aggregate	Zip Code	Date of Receipt
SUBTOTA	L of Receipts This Page (optiona	I)		10013.46

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

10013.46

SCHEDULE B (FOR LIN					INE NUMBER: PAGE 7 OF 25									
ITEMIZED DISBU	JRSEMENTS		arate schedule(s) category of the		hecl	k only	only one)								
	_	Detailed		×	21b 27		22 28a	Щ	23 28b		:4	25 29	26 30b		
Any information copied f	rom such Reports and Stater	I nents mav	not be sold or us	ed by	anv		on f		purr				-		
	ses, other than using the nan														
	. ,	0 5 4 5													
COURAGEOU	S CONSERVATIVE	S PAC													
Full Name (Last, First	t, Middle Initial)														
A. Best Guest Me	edia						Date of Disbursement								
Mailing Address PO E	3ox 3034						08 / D D / Y Y Y Y 2016								
City Wayne	5	State NJ	Zip Code 07474					Trans	acti	on ID	: SB2	1B.49	13		
Purpose of Disbursen															
Media Booking Const Candidate Name	ultant			<u> </u>			Α	Amount	of	Each	Disbu	rseme	ent this	Period	
Candidate Name				Cate T	egor ype					,		,	2500	.00	
Office Sought:		ment For:					Ī	Mer	no lt	em					
	Senate x President	Primary Other (spe	General												
State: Dis	strict:	Other (spe	Ciry) 🔻												
Full Name (Last, First	t, Middle Initial)														
B. C&H Financial	Services						C	Date of	Dis	burse		Y	YY	Y	
Mailing Address 1 W Ste 3	estbrook Corporate Center 300							08			0	L	2016		
City Westchester	:	State IL	Zip Code 60154					Trans	acti	on ID	: SB2	1B.49	915		
Purpose of Disbursen	nent	IL	60134	_		_									
Credit Card Processi	ng Fees						А	Mount	of	Each	Disbu	rseme	ent this	Period	
Candidate Name				Cate		ry/	1						33	.43	
Office Sought:	House Disburser	ment For:	For: 2016					Mer		,		7			
		Primary													
State: Dis	President	Other (spe	ecify) 🔻												
Full Name (Last, First															
C. C&H Financial	,						C	Date of	Dis	burse	ment				
							1	MM	/	D		Y	YYY	Y	
Mailing Address 1 We Ste 3	estbrook Corporate Center 300						J.	08		3	0	-	2016	_	
City Westchester		State IL	Zip Code 60154					Trans	acti	on ID	: SB2	1B.49	917		
Purpose of Disbursen				_	_	_									
Credit Card Processi	ng Fees			L.,			А	mount	of	Each	Disbu	rseme	ent this	Period	
Candidate Name				Cate	egor ype		1						28	.75	
Office Sought:	House Disburser	ment For:	2016		ype		ł	Mor	no lt	, om		7			
	Senate x	Primary	General					wici	non	CIII					
Stata:	President	Other (spe	ecify) 🔻												
State: Dis	strict:						_		_	_	_	_			
SUBTOTAL of Disburse	ements This Page (optional)												2562	.18	
							- ř		-			,			
TOTAL This Period (las	t page this line number only)	·						_		7	_	7			

SCHEDULE B (FEC F	Form 3X)		FO	RLI	NE N	NUMBER: PAGE 8 OF 25								
ITEMIZED DISBURSEN	MENTS	Use separate schedule(for each category of the	s) (ch	neck d	only o	one)								
		Detailed Summary Page		× 2 ⁻ 2 ⁻	1b 7	22 28a		23 28b	24 28c	25 29	26 30b			
Any information copied from such or for commercial purposes, other	Reports and Staten than using the nam	ments may not be sold or ne and address of any pol	used by a litical com	any p mittee	ersor e to s	n for the solicit co	purpo	ose o itions	f soliciting from suc	g contribu h commi	utions ttee.			
NAME OF COMMITTEE (In Fu	,													
	NSERVATIVE	S PAC												
Full Name (Last, First, Middle	Initial)													
A. Neal Mehrota						Date o								
Mailing Address 221 Mohawk T	Frail					08 / D D / Y Y Y Y 2016								
City	ç	State Zip Code				Trans	sactio	on ID	: SB21B.4	4914				
Niskayuna Purpose of Disbursement		NY 12309	1											
Voter Outreach Consulting	11.	Amoun	t of E	Each	Disbursen	nent this	Period							
Candidate Name			Cate					-		1200	.00			
Office Sought: House	Disburser	ment For: 2016	Ту	ре	_		molt		7					
Senate		Primary General					mo lte							
State: District:	ent	Other (specify)												
Full Name (Last, First, Middle	Initial)													
B.	initial)					Date o	f Dist	bursei	ment					
					_	MM	/	D	D / Y	YY	Y			
Mailing Address											_			
City	ę	State Zip Code												
Purpose of Disbursement				-										
Candidate Name						Amount of Each Disbursement this Period								
Candidate Marine			Cate Ty											
Office Sought: House	Disburser	ment For:		-	Memo Item									
Senate Preside		Primary General Other (specify)												
State: District:		Other (specify)												
Full Name (Last, First, Middle	Initial)													
С.						Date o								
Mailing Address					_	M M	/	D	D / Y	ΥΥ	Y			
City	Ş	State Zip Code												
Purpose of Disbursement				_	_									
Candidate Name Category/ Type						Amoun	t of E	Each	Disbursen	nent this	Period			
Office Sought: House Senate	Disburser	nent For: Primary General				Me	mo lte	em	7					
State: District:	ent	Other (specify)												
						_	_	_	_					
SUBTOTAL of Disbursements Th	nis Page (optional)			🌶	•			,		1200	.00			
TOTAL This Daviad flast same th	io lino number esta				_			-		3762	.18			
TOTAL This Period (last page th	is line number only))		🕨	•			,						

LOANS

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

L

FOR LINE 13 OF FORM 3X

9

PAGE

NAME OF COMMITTEE (In Full) COURAGEOUS CONSERVATIVES	S PAC	Trans	saction ID : SC/10.4280
LOAN SOURCE Full Name (Last, First, Mide Christopher Ekstrom	dle Initial)	🗌 Memo Item	Election: Primary General
Mailing Address 25 Highland Park Village Suite 100			Other (specify)
City Dallas	State TX ZIP Co	de 75205	
Original Amount of Loan	Cumulative Payment To		nce Outstanding at Close of This Period
12000.00		0.00	12000.00
Date Incurred	Date Due	Interest Rate	Secured:
10 / Y Y Y Y 10 / 21 / 2015	M / D D / Y	у у у 0.00	% (apr) Yes X No
List All Endorsers or Guarantors (if any) to	Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	л I I I I I I I I Лу I I Ду I I I Л I I I
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation Amount	
City State	ZIP Code	Guaranteed Outstanding:	7
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	л
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	a
SUBTOTALS This Period This Page (optional)		······	12000.00
TOTALS This Period (last page in this line only)			
Carry outstanding balance only to LINE 3, Sche	edule D, for this line. If	no Schedule D, carry forw	vard to appropriate line of Summary.

LOANS

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

L

FOR LINE 13 OF FORM 3X

10

PAGE

NAME OF COMMITTEE (In Full) COURAGEOUS CONSERVATIVES	S PAC	Trans	saction ID : SC/10.4281
LOAN SOURCE Full Name (Last, First, Mid Christopher Ekstrom Mailing Address 25 Highland Park Village	dle Initial)	🗌 Memo Item	Election: Primary General Other (specify)
Suite 100 City Dallas	State TX ZIP Co	de 75205	
Original Amount of Loan	Cumulative Payment To		nce Outstanding at Close of This Period
15000.00		0.00	15000.00
TERMS			
Date Incurred	Date Due	Interest Rate	Secured: % (apr) Yes X No
List All Endorsers or Guarantors (if any) to	Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	7
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	7 7
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	· · · · · · · · · ·
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
SUBTOTALS This Period This Page (optional)		······	15000.00
TOTALS This Period (last page in this line only)	····· [
Carry outstanding balance only to LINE 3, Sch	edule D, for this line. If	no Schedule D, carry forw	vard to appropriate line of Summary.

LOANS

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

OF 25 FOR LINE 13 OF FORM 3X

11

NAME OF COMMITTEE (In Full) COURAGEOUS CONSERVATIVES	S PAC	Trans	saction ID : SC/10.4283
LOAN SOURCE Full Name (Last, First, Mid Christopher Ekstrom	ldle Initial)	🗌 Memo Item	Election: Primary General
Mailing Address 25 Highland Park Village Suite 100			Other (specify)
City Dallas	State TX ZIP Co	de 75205	
Original Amount of Loan	Cumulative Payment To		nce Outstanding at Close of This Period
30000.00		0.00	30000.00
TERMS Date Incurred	Date Due	Interest Rate	Secured:
11 / 17 / 2015			% (apr) Yes X No
List All Endorsers or Guarantors (if any) to	b Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	y - 1 - y - 1
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation Amount	
City State	ZIP Code	Guaranteed Outstanding:	····
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	лу. I
SUBTOTALS This Period This Page (optional)			30000.00
Carry outstanding balance only to LINE 3, Sch	edule D, for this line. If	no Schedule D, carry forw	vard to appropriate line of Summary.

LOANS

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

L

FOR LINE 13 OF FORM 3X

12

PAGE

NAME OF COMMITTEE (In Full) COURAGEOUS CONSERVATIVE	S PAC	Trans	saction ID : SC/10.4404
LOAN SOURCE Full Name (Last, First, Mid Christopher Ekstrom Mailing Address 25 Highland Park Village	Idle Initial)	🗌 Memo Item	Election: Primary General Other (specify)
Suite 100 City Dallas	State TX ZIP Co	ode 75205	
Original Amount of Loan	Cumulative Payment To		nce Outstanding at Close of This Period
6500.00		0.00	6500.00
TERMS Date Incurred	Date Due	Interest Rate	Secured:
01 / 05 / 2016	M M / D D / Y	11/8/16 0.00	
List All Endorsers or Guarantors (if any) to	o Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	g
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	1 1 1 1 1 1 1 1 1 17. 1 1 1 1 1 1 1
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	·····
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	19. 1 1 19. 1 1 19. 1
SUBTOTALS This Period This Page (optional).		······ E	6500.00
TOTALS This Period (last page in this line only	/)	····· [· · · · · · · · · · · ·
Carry outstanding balance only to LINE 3, Sch	edule D, for this line. If	no Schedule D, carry forw	vard to appropriate line of Summary.

LOANS

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

L

13 OF 25 FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full) COURAGEOUS CONSERVATIVE	S PAC	Trans	saction ID : SC/10.4405
LOAN SOURCE Full Name (Last, First, Mid Christopher Ekstrom Mailing Address 25 Highland Park Village	ldle Initial)	🗌 Memo Item	Election: Primary General Other (specify)
Suite 100		da	
City Dallas Original Amount of Loan	State TX ZIP Co Cumulative Payment To	de 75205	nce Outstanding at Close of This Period
20000.00	Cumulative Payment 10	0.00	20000.00
	7	0.00	2000.00
TERMS Date Incurred	Date Due	Interest Rate	Secured:
	M M / D D / Y	11/8/16 0.00	% (apr) Yes X No
List All Endorsers or Guarantors (if any) to	o Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	· · · · · · · · · · · ·
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	7 7
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	7
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	a
SUBTOTALS This Period This Page (optional).		······ ·	20000.00
TOTALS This Period (last page in this line only	/)	····· [
Carry outstanding balance only to LINE 3, Sch	edule D, for this line. If	no Schedule D, carry forw	vard to appropriate line of Summary.

LOANS

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

L

OF 25 FOR LINE 13 OF FORM 3X

14

NAME OF COMMITTEE (In Full) COURAGEOUS CONSERVATIVE	S PAC	Trans	saction ID : SC/10.4406
LOAN SOURCE Full Name (Last, First, Mid Christopher Ekstrom	ldle Initial)	🗌 Memo Item	Election: Primary General
Mailing Address 25 Highland Park Village Suite 100			Other (specify)
		de 75205	
Original Amount of Loan	Cumulative Payment To		nce Outstanding at Close of This Period
8000.00	7	0.00	8000.00
TERMS Date Incurred	Date Due	Interest Rate	Secured:
	M M / D D / Y	11/8/16 0.00	
List All Endorsers or Guarantors (if any) to	b Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	· · · · · · · · · · ·
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	7
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	7 7 7 7 7
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	· · · · · · · · · ·
SUBTOTALS This Period This Page (optional).		······ []	8000.00
TOTALS This Period (last page in this line only)		· · · · · · · · · · ·
Carry outstanding balance only to LINE 3, Sch	edule D, for this line. If	no Schedule D, carry forw	vard to appropriate line of Summary.

LOANS

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

OF 25 FOR LINE 13 OF FORM 3X

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NAME OF COMMITTEE (In Full) COURAGEOUS CONSERVATIVES	S PAC	Trans	saction ID : SC/10.4500
LOAN SOURCE Full Name (Last, First, Mid Christopher Ekstrom	dle Initial)	🗌 Memo Item	Election: Primary General
Mailing Address 25 Highland Park Village Suite 100			Other (specify)
City Dallas	State TX ZIP Co	de 75205	
Original Amount of Loan	Cumulative Payment To		nce Outstanding at Close of This Period
8500.00		0.00	8500.00
TERMS Date Incurred	Date Due	Interest Rate	Secured:
		Y Y Y Y 0.00	% (apr) Yes X No
List All Endorsers or Guarantors (if any) to	b Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	л. і
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation Amount	
City State	ZIP Code	Guaranteed Outstanding:	7 7
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	AP 1 1 AP 1 A A A
4. Full Name (Last, First, Middle Initial)	-	Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	A
SUBTOTALS This Period This Page (optional)		······ [8500.00
TOTALS This Period (last page in this line only	')	····· •	
Carry outstanding balance only to LINE 3, Sch	edule D, for this line. If	no Schedule D, carry forw	ard to appropriate line of Summary.

LOANS

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

OF 25 FOR LINE 13 OF FORM 3X

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NAME OF COMMITTEE (In Full) COURAGEOUS CONSERVATIVES	S PAC	Trans	saction ID : SC/10.4505
LOAN SOURCE Full Name (Last, First, Mid Christopher Ekstrom	dle Initial)	🗌 Memo Item	Election: Primary General
Mailing Address 25 Highland Park Village Suite 100			Other (specify)
City Dallas	State TX ZIP Co	de 75205	
Original Amount of Loan	Cumulative Payment To		nce Outstanding at Close of This Period
30000.00		0.00	30000.00
TERMS Date Incurred	Date Due	Interest Rate	Secured:
		Y Y Y Y 0.00	% (apr) Yes X No
List All Endorsers or Guarantors (if any) to	Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	л. і. д. і. ж. і.
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation Amount	
City State	ZIP Code	Guaranteed Outstanding:	7 7
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	ay 1 a ay 1 a ay 1
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	7
SUBTOTALS This Period This Page (optional)		····· [30000.00
TOTALS This Period (last page in this line only)	····· ►	
Carry outstanding balance only to LINE 3, Sch	edule D, for this line. If	no Schedule D, carry forw	ard to appropriate line of Summary.

LOANS

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

FOR LINE 13 OF FORM 3X

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PAGE

NAME OF COMMITTEE (In Full) COURAGEOUS CONSERVATIVES	S PAC	Trans	saction ID : SC/10.4510
LOAN SOURCE Full Name (Last, First, Mid Christopher Ekstrom	idle Initial)	🗌 Memo Item	Election: Primary General
Mailing Address 25 Highland Park Village Suite 100			Other (specify)
City Dallas	State TX ZIP Co	de 75205	
Original Amount of Loan	Cumulative Payment To		nce Outstanding at Close of This Period
17000.00		0.00	17000.00
Date Incurred	Date Due	Interest Rate	
List All Endorsers or Guarantors (if any) to	b Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	· · · · · · · · · · · · · · · · · · ·
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Guaranteed Outstanding:	· · · · · · · · · ·
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	· · · · · · · · · ·
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	· · · · · · · · · · ·
SUBTOTALS This Period This Page (optional)		······ [17000.00
TOTALS This Period (last page in this line only	')	····· [
Carry outstanding balance only to LINE 3, Sch	edule D, for this line. If	no Schedule D, carry forw	vard to appropriate line of Summary.

LOANS

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

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NAME OF COMMITTEE (In Full) COURAGEOUS CONSERVATIVES	S PAC	Trans	saction ID : SC/10.4555
LOAN SOURCE Full Name (Last, First, Mide Christopher Ekstrom	dle Initial)	🗌 Memo Item	Election: Primary General
Mailing Address 25 Highland Park Village Suite 100			Other (specify)
City Dallas	State TX ZIP Co	de 75205	
Original Amount of Loan	Cumulative Payment To	Date Bala	nce Outstanding at Close of This Period
10000.00		0.00	10000.00
TERMS			
Date Incurred	Date Due	Interest Rate	Secured: % (apr) Yes X No
List All Endorsers or Guarantors (if any) to	Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	7
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation Amount	
City State	ZIP Code	Guaranteed Outstanding:	7 7
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	7
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	an a
SUBTOTALS This Period This Page (optional)		······ [10000.00
TOTALS This Period (last page in this line only)		······ L	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
Carry outstanding balance only to LINE 3, Sche	edule D, for this line. If	no Schedule D, carry forw	ard to appropriate line of Summary.

LOANS

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

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FOR LINE 13 OF FORM 3X

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NAME OF COMMITTEE (In Full) COURAGEOUS CONSERVATIVE	S PAC	Tran	saction ID : SC/10.4892
LOAN SOURCE Full Name (Last, First, Mic Christopher Ekstrom Mailing Address 25 Highland Park Village Suite 100	dle Initial)	🗌 Memo Item	Election: Primary General Other (specify)
City Dallas	State TX ZIP Co	ode 75205	· · · · · · · · · · · · · · · · · · ·
Original Amount of Loan	Cumulative Payment To		nce Outstanding at Close of This Period
4567.89	7	0.00	4567.89
TERMS Date Incurred	Date Due	Interest Rate	e Secured:
M07 / D1 / Y Y Y Y 2016		0.00	
List All Endorsers or Guarantors (if any) to	o Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	7 7
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	AT 1 A A A A A A A A A A A A A A A A A A
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	y
SUBTOTALS This Period This Page (optional).		······	4567.89
TOTALS This Period (last page in this line only	y)	····· E	
Carry outstanding balance only to LINE 3, Sch	hedule D, for this line. If	no Schedule D, carry forw	vard to appropriate line of Summary.

LOANS

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

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FOR LINE 13 OF FORM 3X

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NAME OF COMMITTEE (In Full) COURAGEOUS CONSERVATIVES	S PAC	Trans	saction ID : SC/10.4891
LOAN SOURCE Full Name (Last, First, Mid Christopher Ekstrom	dle Initial)	🗌 Memo Item	Election: Primary General
Mailing Address 25 Highland Park Village Suite 100			Other (specify)
City Dallas	State TX ZIP Co	de 75205	
Original Amount of Loan	Cumulative Payment To	Date Balar	nce Outstanding at Close of This Period
6000.00		0.00	6000.00
TERMS Date Incurred	Date Due	Interest Rate	Secured:
		Y Y Y Y 0.00	% (apr) Yes X No
List All Endorsers or Guarantors (if any) to	Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	7
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation Amount	
City State	ZIP Code	Guaranteed Outstanding:	7 7
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	· · · · · · · ·
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	7
SUBTOTALS This Period This Page (optional)		······ [6000.00
TOTALS This Period (last page in this line only)	····· •	
Carry outstanding balance only to LINE 3, Sch	edule D, for this line. If	no Schedule D, carry forw	ard to appropriate line of Summary.

LOANS

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

FOR LINE 13 OF FORM 3X

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PAGE

NAME OF COMMITTEE (In Full) COURAGEOUS CONSERVATIVE	S PAC	Trans	saction ID : SC/10.4918	
LOAN SOURCE Full Name (Last, First, Mic Christopher Ekstrom	ldle Initial)	🗌 Memo Item	Election: Primary General	
Mailing Address 25 Highland Park Village Suite 100			Other (specify)	
City Dallas	State TX ZIP Co	de 75205		
Original Amount of Loan	Cumulative Payment To	Date Bala	nce Outstanding at Close of This Period	
10013.46		0.00	10013.46	
TERMS Date Incurred	Date Due	Interest Rate	Secured:	
Mom / Dod / Y Y Y 08 / 04 / 2016				
List All Endorsers or Guarantors (if any) to	o Loan Source			
1. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:	л н н н н н н н лу н н лу н н лж н	
2. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation Amount		
City State	ZIP Code	Guaranteed Outstanding:	л. н. л . н. л . н.	
3. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Amount		
City State	ZIP Code	Guaranteed Outstanding:		
4. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:		
SUBTOTALS This Period This Page (optional) 10013.46 TOTALS This Period (last page in this line only) 177581.35 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.				

ITEMIZED INDEPENDENT EXPENDIT	URES			PAGE 22 OF 25 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
COURAGEOUS CONSERVATI	VES PAC			C C00587022
Check if 24-hour report 48-hour rep	port New rep	port Amends repo		
Full Name of Payee		Memo Ite	em Date	of Public Distribution/Dissemination
Christopher Ekstrom				08 / D D / Y Y Y Y 14 2016
Mailing Address 25 Highland Park Village			Amou	int
Suite 100				
City Dallas	State TX	Zip Code 75205		1444.55 action ID : SE.4763
Purpose of Expenditure Social Media Buy		Category/ Type 004		of Disbursement or Obligation 08 / D D / Y Y Y Y 08 2016
Name of Federal Candidate		x Support	Office Sough	nt: House District: 00
KELLI WARD		Oppose	Preside	ent Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought		6512.44	Disbursemen 2016	nt For: X Primary General Dther (specify) ►
Full Name of Payee		Memo Ite	m Date	of Public Distribution/Dissemination
Christopher Ekstrom				08 14 2016
Mailing Address 25 Highland Park Village			Amou	unt
Suite 100 City	State	Zip Code		2766.83
Dallas	TX	75205		action ID : SE.4764 of Disbursement or Obligation
Purpose of Expenditure Social Media Buy		Category/ Type 004		08 / 14 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sough	nt: House District: 00
JOHN S MCCAIN		X Oppose	Presid	lent Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought		9279.27	Disbursemer 2016	ht For: ✗ Primary General Other (specify) ►
(a) SUBTOTAL of Itemized Independent Exp	penditures		•	4211.38
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures				· · · · · · · · · ·
Under penalty of perjury I certify that the in with, or at the request or suggestion of, any party committee) any political party committe	candidate or authorized			
Elizabeth Curtis	[Electron	ically Filed]	09 /	20 / Y = Y = Y = Y 20 2016
Signature		Date	00	

TIEMIZED INDEPENDENT EXPENDITORE	5			PAGE 23 OF 25 FOR LINE 24 OF FORM 3X	
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER	
COURAGEOUS CONSERVATIVES	PAC				
				C C00587022	
Check if 24-hour report 48-hour report	New rep	port Amends repo	ort filed on		
Full Name of Payee		Memo It	tem D	ate of Public Distribution/Dissemination	
Christopher Ekstrom				08 / D D / Y Y Y Y 08 19 2016	
Mailing Address 25 Highland Park Village			A	Amount	
Suite 100					
City	State	Zip Code	- I L	1266.00	
Dallas	ТХ	75205		ansaction ID : SE.4895 late of Disbursement or Obligation	
Purpose of Expenditure Social Media Buy		Category/ Type 004		M M / D D / Y Y Y Y Y 08 / 19 / 2016	
Name of Federal Candidate		Support	Office So	ought: House District: 00	
JOHN S MCCAIN		X Oppose		esident X Senate State: AZ	
Calendar Year-To-Date Per Election for Office Sought		10545.27	Disburse 2016	ement For: X Primary General	
Full Name of Payee	,,,	Memo Ite		Other (specify) ►	
Christopher Ekstrom				Date of Public Distribution/Dissemination	
Mailing Address				08 19 2016	
25 Highland Park Village			A	mount	
Suite 100 City	State	Zip Code	— Г	38.15	
Dallas	TX	75205	Tra	ansaction ID : SE.4896	
Purpose of Expenditure				Date of Disbursement or Obligation	
Social Media Buy		Category/ Type 004		08 / 19 / Y Y Y Y Y 2016	
Name of Federal Candidate		X Support	Office S	ought: 🗶 House District: 04	
Paul Gosar		Oppose	Pr	resident Senate State: <u>AZ</u>	
Calendar Year-To-Date		20.45		ement For: X Primary General	
Per Election for Office Sought		38.15	2016	Other (specify) ►	
(a) SUBTOTAL of Itemized Independent Expendit	ures		• •	1304.15	
(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.					
Elizabeth Curtis	[Electron	nically Filed]	09	20 / Y Y Y Y Y Y	
Signature	• ·····	Date			

ITEMIZED INDEPENDENT EXPENDITORES				PAGE 24 OF 25 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
COURAGEOUS CONSERVATIVES P	AC			C C00587022
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed or	
Full Name of Payee		Memo It	em E	Date of Public Distribution/Dissemination
Christopher Ekstrom				M M / D D / Y Y Y Y 08 25 2016
Mailing Address 25 Highland Park Village			A	Amount
Suite 100			r	
City	State	Zip Code		478.36
Dallas	ТХ	75205		ansaction ID : SE.4902 Date of Disbursement or Obligation
Purpose of Expenditure Social Media Buy		Category/ Type 004		M M / D D / Y Y Y Y 08 / 25 / 2016
Name of Federal Candidate		Support	Office S	Sought: House District: 00
JOHN S MCCAIN		X Oppose	Pi	resident X Senate State: AZ
Calendar Year-To-Date		44000.00	Disburse 2016	ement For: X Primary General
Per Election for Office Sought	yy	11023.63	2010	Other (specify) ►
Full Name of Payee		Memo Ite	em [Date of Public Distribution/Dissemination
Christopher Ekstrom				08 / D D / Y Y Y Y 25 2016
Mailing Address 25 Highland Park Village				Amount
Suite 100				
City	State	Zip Code		1049.73
Dallas	ТХ	75205		ransaction ID : SE.4903 Date of Disbursement or Obligation
Purpose of Expenditure Social Media Buy		Category/ Type 004		M m / D p / Y
Name of Federal Candidate		X Support	Office S	Sought: House District: 00
KELLI WARD		Oppose	P	resident X Senate State: AZ
Calendar Year-To-Date		10070.00		ement For: X Primary General
Per Election for Office Sought	7	12073.36	2016	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	S		• •	1528.09
(b) SUBTOTAL of Uniternized Independent Expenditu	Iree			
	100			
(c) TOTAL Independent Expenditures			. F	
				4
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.				
Elizabeth Curtis			м	
Signature	[Electron	<i>ically Filed]</i> Date	9 09	20 2016
oignature				

ITE	EMIZED INDEPENDENT EXPENDITURES	PAGE 25 OF 25 FOR LINE 24 OF FORM 3X			
NA	AME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼			
C	COURAGEOUS CONSERVATIVES PAC	C C00587022			
		0 000387022			
Ch	neck if 24-hour report 48-hour report New report Amends report	filed on			
	Full Name of Payee Memo Item	Date of Public Distribution/Dissemination			
	Christopher Ekstrom	08 / D D / Y Y Y Y 2016			
	Mailing Address 25 Highland Park Village	Amount			
	Suite 100				
	City State Zip Code Dallas TX 75205	469.84 Transaction ID : SE.4894			
		Date of Disbursement or Obligation			
	Purpose of Expenditure Social Media BuyCategory/ Type004	08 / D D / Y Y Y Y 26 / 2016			
	Name of Federal Candidate Support C	Office Sought: House District: 00			
	KELLI WARD Oppose	President X Senate State: AZ			
		Disbursement For: 🗶 Primary 🗌 General			
	Per Election for Office Sought	Other (specify) ►			
	Full Name of Payee Memo Item	Date of Public Distribution/Dissemination			
		M M / D D / Y Y Y Y			
	Mailing Address	Amount			
		Anount			
	City State Zip Code				
		Date of Disbursement or Obligation			
	Purpose of Expenditure Category/ Type				
	Name of Federal Candidate Support C	Office Sought: House District:			
	Oppose	President Senate State:			
	Calendar Year-To-Date	Disbursement For: Primary General			
	Per Election for Office Sought	Other (specify)			
	(a) SUBTOTAL of Itemized Independent Expenditures.	469.84			
	(b) SUBTOTAL of Uniternized Independent Expenditures				
	(c) TOTAL Independent Expenditures	7513.46			
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.					
	Elizabeth Curtis [Electronically Filed] Date	09 / D / Y Y Y Y 20 2016			
	Signature				