

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

(Schedule E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Conservative Campaign Committee		FEC IDENTIFICATION NUMBER ▼ C C00495010	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Wierzbicki, Joe (Joseph), , Mr,		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 09 / 2017	
Mailing Address 1501 15th Street Apt. 4		Amount 1000.00	
City Sacramento	State CA	Zip Code 95814-6019	Transaction ID : E-161791
Purpose of Expenditure Online Advertising	Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 05 / 10 / 2017	
Name of Federal Candidate Quist, Rob, , ,		Office Sought: <input checked="" type="checkbox"/> House District: 00 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MT	
Calendar Year-To-Date Per Election for Office Sought 1250.00		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ Special General-2017	

Full Name of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure	Category/Type		
Name of Federal Candidate		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1000.00
(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.

Lawler, Kelly, , ,

[Electronically Filed]

Date

MM / DD / YYYY
05 / 10 / 2017

Signature

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB
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Form/Schedule: F24N
Transaction ID :

For activity in connection with MT Special General on 5/25/17.

Form/Schedule:
Transaction ID: