

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

The Conservative Caucus Political Action Committee

Report Covering the Period:

From:

10 / 01 / 2014

To:

11 / 24 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1,	0	0
(b) Cash on Hand at Beginning of Reporting Period.....	947.84	
(c) Total Receipts (from Line 19)	270.00	7040.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	1,217.84	7,040.00
7. Total Disbursements (from Line 31).....	791.53	6,613.69
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	426.31	426.31
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	8509.41	



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

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

The Conservative Caucus Political Action Committee

Report Covering the Period: From:

MM / DD / YYYY
10 / 01 / 2014

To:

MM / DD / YYYY
11 / 24 / 2014

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).....

250.00

750.00

(ii) Unitemized.....

20.00

614.00

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

270.00

689.00

(b) Political Party Committees.....

0

0

(c) Other Political Committees (such as PACs).....

0

0

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

270.00

689.00

12. Transfers From Affiliated/Other Party Committees.....

0

0

13. All Loans Received.....

0

0

14. Loan Repayments Received.....

0

150.00

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

0

0

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

0

0

17. Other Federal Receipts (Dividends, Interest, etc.).....

0

0

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3).....

0

0

(b) Levin Funds (from Schedule H5).....

0

0

(c) Total Transfers (add 18(a) and 18(b))..

0

0

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

270.00

704.00

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

270.00

704.00

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	0
(ii) Non-Federal Share.....	0	0
(b) Other Federal Operating Expenditures	791.53	6,463.69
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	791.53	6,463.69
22. Transfers to Affiliated/Other Party Committees.....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0	0
24. Independent Expenditures (use Schedule E).....	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0	0
26. Loan Repayments Made.....	0	1,500.00
27. Loans Made.....	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0	0
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0	0
29. Other Disbursements	0	0
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0	0
(ii) "Levin" Share.....	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds	0	0
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	791.53	6,613.69
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	791.53	6,613.69

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 / OF /

<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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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)

The Conservative Caucus Political Action Committee

Full Name (Last, First, Middle Initial)

A. *Clair, Thomas E.*

Mailing Address

302 Cross Creek Ct.

City

Pittsburgh

State

PA

Zip Code

15237

FEC ID number of contributing federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

25000

Date of Receipt

11 / 03 / 2014

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

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

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

250.00

**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)							PAGE 1 OF 2			
	<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

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)
The Conservative Caucus Political Action Committee

A. *Authorize.net*

Full Name (Last, First, Middle Initial)

Mailing Address: *PO Box 947*

City: *American Fork* State: *UT* Zip Code: *84003*

Purpose of Disbursement: *Merchant Fee*

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: *10/10/2014*

Amount of Each Disbursement this Period: *56.00*

Category/Type: *001*

B. *Orndorff, Charles Lee*

Full Name (Last, First, Middle Initial)

Mailing Address: *1125 Old Bridge Road*

City: *Amissville* State: *VA* Zip Code: *20106*

Purpose of Disbursement: *PO Box fee*

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: *10/17/2014*

Amount of Each Disbursement this Period: *26.00*

Category/Type: *001*

C. *List Processing Specialists*

Full Name (Last, First, Middle Initial)

Mailing Address: *PO Box 2325*

City: *Fairfax* State: *VA* Zip Code: *22031*

Purpose of Disbursement: *Data Processing*

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: *10/17/2014*

Amount of Each Disbursement this Period: *153.53*

Category/Type: *001*

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)						PAGE 2 OF 2
	<input checked="" type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b	

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)
The Conservative Caucus Political Action Committee

Full Name (Last, First, Middle Initial) A. <i>Strive Communications</i>		Date of Disbursement 10 / 17 / 2014
Mailing Address <i>11921 Freedom Drive</i>		Amount of Each Disbursement this Period <i>250.00</i>
City <i>Reston</i>	State <i>VA</i>	
Zip Code <i>20190</i>		Category/Type <i>001</i>
Purpose of Disbursement <i>Printing and mailing</i>		
Candidate Name		Amount of Each Disbursement this Period <i>250.00</i>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. <i>Conrad Direct</i>		Date of Disbursement 10 / 17 / 2014
Mailing Address <i>300 Knickerbocker Road</i>		Amount of Each Disbursement this Period <i>250.00</i>
City <i>Crosskill</i>	State <i>NJ</i>	
Zip Code <i>07626</i>		Category/Type <i>001</i>
Purpose of Disbursement <i>List rental</i>		
Candidate Name		Amount of Each Disbursement this Period <i>250.00</i>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. <i>Authorize.net</i>		Date of Disbursement 11 / 13 / 2014
Mailing Address <i>PO Box 947</i>		Amount of Each Disbursement this Period <i>56.00</i>
City <i>American Fork</i>	State <i>UT</i>	
Zip Code <i>84003</i>		Category/Type <i>001</i>
Purpose of Disbursement <i>merchant fee</i>		
Candidate Name		Amount of Each Disbursement this Period <i>56.00</i>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	
TOTAL This Period (last page this line number only).....	<i>791.53</i>

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full)
The Conservative Cancer Political Action Committee

LOAN SOURCE Full Name (Last, First, Middle Initial)	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address	
City State ZIP Code	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period

TERMS		Date Incurred	Date Due	Interest Rate	Secured:
<input type="checkbox"/> M M / <input type="checkbox"/> D D / <input type="checkbox"/> Y Y Y Y	<input type="checkbox"/> M M / <input type="checkbox"/> D D / <input type="checkbox"/> Y Y Y Y			<input type="checkbox"/> % (apr)	<input type="checkbox"/> Yes <input type="checkbox"/> 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: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)	<input type="text"/>
TOTALS This Period (last page in this line only)	<input type="text" value="0"/>
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

2004-11-11 10:11:11 AM

SCHEDULE D (FEC Form 3X)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
The Conservative Caucus Political Action Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <i>STRIVE Communications</i>	Nature of Debt (Purpose): <i>printing & mailing</i>
Mailing Address <i>11921 Freedom Drive Ste 550</i>	
City State Zip Code <i>Ruston VA 20190</i>	

Outstanding Balance Beginning This Period <i>6,118.00</i>	Amount Incurred This Period <i>0</i>	Payment This Period <i>250</i>	Outstanding Balance at Close of This Period <i>5,868.00</i>
--	---	-----------------------------------	--

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <i>Conrad Direct</i>	Nature of Debt (Purpose): <i>LIST Rental</i>
Mailing Address <i>300 Knickerbocker Rd.</i>	
City State Zip Code <i>Crosskill NJ 07626</i>	

Outstanding Balance Beginning This Period <i>1,391.41</i>	Amount Incurred This Period	Payment This Period <i>250.00</i>	Outstanding Balance at Close of This Period <i>1,141.41</i>
--	-----------------------------	--------------------------------------	--

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <i>The Waters Agency</i>	Nature of Debt (Purpose): <i>direct mail consulting</i>
Mailing Address <i>211 N. Union St. Ste 100</i>	
City State Zip Code <i>Alexandria VA 22314</i>	

Outstanding Balance Beginning This Period <i>1,500.00</i>	Amount Incurred This Period <i>0</i>	Payment This Period <i>0</i>	Outstanding Balance at Close of This Period <i>1,500.00</i>
--	---	---------------------------------	--

1) SUBTOTALS This Period This Page (optional).....▶	
2) TOTALS This Period (last page this line number only).....▶	<i>8,509.41</i>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....▶	<i>0</i>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)▶	<i>8,509.41</i>

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d))

(To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full)
The Conservative Caucus Political Action Committee

Has your committee been designated to make coordinated expenditures by a political party committee?
 YES NO
 If YES, name the designating committee:

Full Name of Subordinate Committee
 Mailing Address
 City State ZIP Code

Full Name (Last, First, Middle Initial) of Each Payee	Purpose of Expenditure	Category/Type
Mailing Address	Date	
City State Zip Code	Amount	
Name of Federal Candidate Supported	Office Sought: House Senate Presidential	State: District:
Aggregate General Election Expenditure for this Candidate ▶		
Full Name (Last, First, Middle Initial) of Each Payee	Purpose of Expenditure	Category/Type
Mailing Address	Date	
City State Zip Code	Amount	
Name of Federal Candidate Supported	Office Sought: House Senate Presidential	State: District:
Aggregate General Election Expenditure for this Candidate ▶		
Full Name (Last, First, Middle Initial) of Each Payee	Purpose of Expenditure	Category/Type
Mailing Address	Date	
City State Zip Code	Amount	
Name of Federal Candidate Supported	Office Sought: House Senate Presidential	State: District:
Aggregate General Election Expenditure for this Candidate ▶		

SUBTOTAL of Expenditures This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶ *0*

FROM: PHILIP HANSON

Charles L. Orndorff
1125 Old Bridge Rd.
Amissville, VA 20106-2142

NON-PROFIT



RECEIVED


2014 DEC -8 AM 9:00

FEC MAIL CENTER

Federal Election Commission
999 E Street NW
Washington, DC 20463

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input checked="" type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked


PREPARER
(8/2013)

12/8/14
DATE PREPARED

11-11-11 11:11:11