## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full) Senate Conservatives Fund	FEC IDENTIFICATION NUMBER ▼
Condition Constitution Fund	C C00448696
Check if 24-hour report 48-hour report New report Amends report filed on	
Full Name of Payee Envision Printers/Marketing	Date of Public Distribution/Dissemination
Mailing Address 2 Riverbend Pkwy	06 20 2016 Amount
City State Zip Code	5290.91
Leesburg VA 20176-0000	Transaction ID : E412FE0C67B9148999A8 Date of Disbursement or Obligation
Purpose of Expenditure IE-Glenn-Direct Mail Production  Category/ Type	06 / 21 / 2016
Name of Federal Candidate Support Of	ffice Sought: House District:
Darryl Glenn Oppose	President Senate State: CO
	isbursement For:
Full Name of Payee Senate Conservatives Fund	Date of Public Distribution/Dissemination
Mailing Address PO Box 388	06 21 2016 Amount
City State Zip Code	1209.25
Alexandria VA 22313-0388	Transaction ID : EC587341A6ED347CE8F6 Date of Disbursement or Obligation
Purpose of Expenditure IE-Glenn-Donation Processing  Category/ Type	06 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support O	ffice Sought: House District:
Darryl Glenn Oppose	President X Senate State: CO
	isbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	6500.16
(b) SUBTOTAL of Unitemized Independent Expenditures	
	7 7
(c) TOTAL Independent Expenditures	6500.16
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.	
Paul Kilgore [Electronically Filed] Date	06 21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	