

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

CONSERVATIVE MAJORITY FUND

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>		127851.13
(b) Cash on Hand at Beginning of Reporting Period.....	33678.47	
(c) Total Receipts (from Line 19)	56566.94	1560426.94
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	90245.41	1688278.07
7. Total Disbursements (from Line 31).....	50045.71	1648078.37
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	40199.70	40199.70
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)	0.00	

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

Write or Type Committee Name

CONSERVATIVE MAJORITY FUND

Report Covering the Period: From: / / To: / /

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).....	14513.00	207387.57
(ii) Unitemized	40382.68	1308259.24
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	54895.68	1515646.81
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	54895.68	1515646.81
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	2900.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	1671.26	41880.13
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	56566.94	1560426.94
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	56566.94	1560426.94

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	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	50025.71	1547863.37
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	50025.71	1547863.37
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	20.00	16245.00
24. Independent Expenditures (use Schedule E)	0.00	15000.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	2900.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	70.00
(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	70.00
29. Other Disbursements	0.00	66000.00
30. 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
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	50045.71	1648078.37
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	50045.71	1648078.37

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	54895.68	1515646.81
34. Total Contribution Refunds (from Line 28(d))	0.00	70.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	54895.68	1515576.81
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	50025.71	1547863.37
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	50025.71	1547863.37

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 6 OF 67
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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)
CONSERVATIVE MAJORITY FUND

A. J MIKE AGEE 370
 Full Name (Last, First, Middle Initial)
 Mailing Address 2796 LEEVILLE PIKE
 City LEBANON State TN Zip Code 37090
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation FLIGHT INSTRUCTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 10 / 2014
Transaction ID : SA11AI.69251
 Amount of Each Receipt this Period
 50.00

B. MR JAMES L AMOS 216
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 807
 City CHESTERTOWN State MD Zip Code 21620
 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 ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 04 / 2014
Transaction ID : SA11AI.69273
 Amount of Each Receipt this Period
 100.00

C. MR TED E AMSBAUGH 591
 Full Name (Last, First, Middle Initial)
 Mailing Address 1302 24TH ST W #329
 City BILLINGS State MT Zip Code 59102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 02 / 2014
Transaction ID : SA11AI.69275
 Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 7 OF 67
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR KENNETH L BAKER 826
 Full Name (Last, First, Middle Initial)
 Mailing Address 2150 GARDEN CREEK RD
 City State Zip Code
 CASPER WY 82601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 ROCKY MOUNAIN BRAKE PRESIDENT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1050.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : SA11AI.69297
 Amount of Each Receipt this Period
 300.00

B. MS IVA L BALLARD 672
 Full Name (Last, First, Middle Initial)
 Mailing Address 2125 W HARBORLIGHT CT
 City State Zip Code
 WICHITA KS 67204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2014
Transaction ID : SA11AI.69300
 Amount of Each Receipt this Period
 300.00

C. MR FRED BEASLEY 770
 Full Name (Last, First, Middle Initial)
 Mailing Address 4741 WORLD HOUSTON PKWY
 STE 150
 City State Zip Code
 HOUSTON TX 77032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INTEGRA LOGISTICS SERVICES LLC CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : SA11AI.69318
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 850.00
TOTAL This Period (last page this line number only)..... ▶

**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 8 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MRS SHARI L BECK 882
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1494

City EUNICE State NM Zip Code 88231

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 ▼ **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 11 / 2014

Transaction ID : SA11AI.69324

Amount of Each Receipt this Period
100.00

B. MR JAMES L BELL 356
Full Name (Last, First, Middle Initial)

Mailing Address 2305 SHADY GROVE LN SW

City DECATUR State AL Zip Code 35603

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 ▼ **290.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 25 / 2014

Transaction ID : SA11AI.69334

Amount of Each Receipt this Period
50.00

C. MR ALFRED L BELLOTTO 338
Full Name (Last, First, Middle Initial)

Mailing Address 2200 FAIRMOUNT AVE

City LAKELAND State FL Zip Code 33803

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 ▼ **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 27 / 2014

Transaction ID : SA11AI.69337

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 9 OF 67
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR HAROLD E BERGDAHL 852
 Full Name (Last, First, Middle Initial)
 Mailing Address 116 LEISURE WORLD
 City MESA State AZ Zip Code 85206
 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 ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : SA11AI.69345
 Amount of Each Receipt this Period
 100.00

B. MR BART D BLUM 467
 Full Name (Last, First, Middle Initial)
 Mailing Address 6944 N 300 W
 City DECATUR State IN Zip Code 46733
 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 ▼ 214.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : SA11AI.69364
 Amount of Each Receipt this Period
 107.00

C. MS DIANE BOSLER 298
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 242
 City ALLENDALE State SC Zip Code 29810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer JCO FARMS Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 10 / 2014
Transaction ID : SA11AI.69372
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 257.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 10 OF 67
(check only one)

<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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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial)
A. VINAL BOWYER 469

Mailing Address 2539 S WILLOW CREEK DR

City PERU	State IN	Zip Code 46970
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FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED/ SELF EMPLOYED	Occupation FARMER
--	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	10	/	2014

Transaction ID : SA11AI.69380

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)
B. MR PETER B BRANDT 339

Mailing Address 2530 SW 52ND LN

City CAPE CORAL	State FL	Zip Code 33914
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FEC ID number of contributing federal political committee. **C**

Name of Employer CAPE CORAL SAIL & POWER	Occupation COMMITTEEMAN
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **335.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2014

Transaction ID : SA11AI.69385

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)
C. Mr David L Brick 902

Mailing Address 1710 Huntsman Ct

City Rancho Palos Verde	State CA	Zip Code 90275
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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 ▼ **300.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	30	/	2014

Transaction ID : SA11AI.69388

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**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 11 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MRS NORMA J BROWN 170
 Full Name (Last, First, Middle Initial)
 Mailing Address 410 CHESTNUT DR
 City BOILING SPRGS State PA Zip Code 17007
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014
Transaction ID : SA11AI.69403
 Amount of Each Receipt this Period
 100.00

B. MR GERALD G BURTNER 708
 Full Name (Last, First, Middle Initial)
 Mailing Address 733 CASTLE KIRK DR
 City BATON ROUGE State LA Zip Code 70808
 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 ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2014
Transaction ID : SA11AI.69431
 Amount of Each Receipt this Period
 100.00

C. HORRACE D CAIN 773
 Full Name (Last, First, Middle Initial)
 Mailing Address 31619 BOHLSEN RD
 City NEW CANEY State TX Zip Code 77357
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ACADEMY OF MODEL AERONAUTICS Occupation EXECUTIVE VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2014
Transaction ID : SA11AI.69437
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**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 12 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. DR CLEMENT CARROLL 713		Date of Receipt
Mailing Address 1017 SEBILLE DR		<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>
City	State	Zip Code
ALEXANDRIA	LA	71315
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.69455
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="400.00"/>	

Full Name (Last, First, Middle Initial) B. MS VIRGINIA CHITWOOD 796		Date of Receipt
Mailing Address 95 HEDGES RD		<input type="text" value="12"/> / <input type="text" value="09"/> / <input type="text" value="2014"/>
City	State	Zip Code
ABILENE	TX	79605
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.69472
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	HOMEMAKER	<input type="text" value="200.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="400.00"/>	

Full Name (Last, First, Middle Initial) C. MR BOBBY CLARK 754		Date of Receipt
Mailing Address 8048 S FM 898		<input type="text" value="12"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>
City	State	Zip Code
WHITEWRIGHT	TX	75491
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.69478
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="275.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="400.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 13 OF 67
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR JAMES B COBB 700
 Full Name (Last, First, Middle Initial)
 Mailing Address 166 W OAKRIDGE PARK
 City METAIRIE State LA Zip Code 70005
 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 ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : SA11AI.69488
 Amount of Each Receipt this Period
 100.00

B. MS LORRAINE COOK 983
 Full Name (Last, First, Middle Initial)
 Mailing Address 6738 CHICO WAY NW
 City BREMERTON State WA Zip Code 98312
 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 ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : SA11AI.69510
 Amount of Each Receipt this Period
 50.00

C. MR PAUL COSTA 894
 Full Name (Last, First, Middle Initial)
 Mailing Address 99 UPPER COLONY RD
 City WELLINGTON State NV Zip Code 89444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer US MARINES Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : SA11AI.69525
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**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 14 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. Mr Gerald V Cox 237
 Full Name (Last, First, Middle Initial)
 Mailing Address 201 Bellhaven Rd
 City Portsmouth State VA Zip Code 23702
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 10 / 2014
Transaction ID : SA11AI.69528
 Amount of Each Receipt this Period
 100.00

B. MR JEROME D COYNE 463
 Full Name (Last, First, Middle Initial)
 Mailing Address 7825 W 400 N
 City MICHIGAN CITY State IN Zip Code 46360
 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 ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 04 / 2014
Transaction ID : SA11AI.69530
 Amount of Each Receipt this Period
 350.00

c. Mrs Patricia R Cranston 940
 Full Name (Last, First, Middle Initial)
 Mailing Address 23460 Camino Hermoso Dr
 City Los Altos State CA Zip Code 94024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : SA11AI.69534
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 15 OF 67
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS COLLEEN M CRONK 727
 Full Name (Last, First, Middle Initial)
 Mailing Address 701 KINGSWOOD DR
 City State Zip Code
 ROGERS AR 72756
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2014
Transaction ID : SA11AI.69539
 Amount of Each Receipt this Period
 100.00

B. MRS JOAN M CROY 481
 Full Name (Last, First, Middle Initial)
 Mailing Address 6200 BLANCHETT RD
 City State Zip Code
 NEWPORT MI 48166
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2014
Transaction ID : SA11AI.69540
 Amount of Each Receipt this Period
 50.00

C. MS DOLORES R CUMMINGS 278
 Full Name (Last, First, Middle Initial)
 Mailing Address 2715 DICKINSON AVE RM 206B
 City State Zip Code
 GREENVILLE NC 27834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2014
Transaction ID : SA11AI.69545
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 185.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 16 OF 67
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR THOMAS CURENS 405
 Full Name (Last, First, Middle Initial)
 Mailing Address 1508 CANTRILL DR
 City LEXINGTON State KY Zip Code 40505
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 24 / 2014
Transaction ID : SA11AI.69548
 Amount of Each Receipt this Period
 75.00

B. MR DALE L DAIGLE 047
 Full Name (Last, First, Middle Initial)
 Mailing Address 17 CENTER LIMESTONE RD
 City LIMESTONE State ME Zip Code 04750
 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 ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014
Transaction ID : SA11AI.69552
 Amount of Each Receipt this Period
 30.00

C. MS MARGIE D DENISON 841
 Full Name (Last, First, Middle Initial)
 Mailing Address 4354 S HERMOSA WAY
 City SALT LAKE CITY State UT Zip Code 84124
 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 ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : SA11AI.69590
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 155.00
TOTAL This Period (last page this line number only)..... ▶

**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 17 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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)
CONSERVATIVE MAJORITY FUND

A. MS MARGIE D DENISON 841
 Full Name (Last, First, Middle Initial)
 Mailing Address 4354 S HERMOSA WAY
 City SALT LAKE CITY State UT Zip Code 84124
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 10 / 2014
Transaction ID : SA11AI.69589
 Amount of Each Receipt this Period
 50.00

B. MR N STUART DICKSON 809
 Full Name (Last, First, Middle Initial)
 Mailing Address 1735 OSAGE WAY
 City COLORADO SPRINGS State CO Zip Code 80915
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation DISABLED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : SA11AI.69598
 Amount of Each Receipt this Period
 50.00

C. MS AMELIA DURAN 782
 Full Name (Last, First, Middle Initial)
 Mailing Address 13614 BARSAN RD
 City SAN ANTONIO State TX Zip Code 78249
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEDCOM Occupation DEPUTY CHIEF OF INSPECTIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014
Transaction ID : SA11AI.69623
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**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 18 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR RICHARD G EGGLESTON 494
 Full Name (Last, First, Middle Initial)
 Mailing Address 8266 E GARFIELD RD
 City HESPERIA State MI Zip Code 49421
 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 ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2014
Transaction ID : SA11AI.69638
 Amount of Each Receipt this Period
 40.00

B. DUCHESS T EMERSON 838
 Full Name (Last, First, Middle Initial)
 Mailing Address 11449 N EASTSHORE DR
 City HAYDEN State ID Zip Code 83835
 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 ▼ 1230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2014
Transaction ID : SA11AI.69651
 Amount of Each Receipt this Period
 290.00

C. MS DOROTHY E ENGLER 229
 Full Name (Last, First, Middle Initial)
 Mailing Address 250 PANTOPS MOUNTAIN RD
 APT 2315
 City CHARLOTTESVLE State VA Zip Code 22911
 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 ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : SA11AI.69656
 Amount of Each Receipt this Period
 210.00

SUBTOTAL of Receipts This Page (optional).....▶	540.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 19 OF 67
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR ROBERT J FASTIGGI 346
 Full Name (Last, First, Middle Initial)
 Mailing Address 409 ULELAH AVE
 City PALM HARBOR State FL Zip Code 34683
 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 ▼ 551.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 02 / 2014
Transaction ID : SA11AI.69671
 Amount of Each Receipt this Period
 86.00

B. MR RAYMOND N FINK 488
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 134
 City WILLIAMSTON State MI Zip Code 48895
 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 ▼ 890.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 26 / 2014
Transaction ID : SA11AI.69685
 Amount of Each Receipt this Period
 50.00

C. MRS SUSAN M FITZHUGH 890
 Full Name (Last, First, Middle Initial)
 Mailing Address 3169 DEGAS TAPESTRY AVE
 City HENDERSON State NV Zip Code 89044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 04 / 2014
Transaction ID : SA11AI.69694
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 236.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 OF 67
(check only one)

<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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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MRS JANE GELDERMANN 600
Full Name (Last, First, Middle Initial)
Mailing Address 2500 INDIGO LN UNIT 222

City GLENVIEW	State IL	Zip Code 60026
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation HOMEMAKER
--------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12	/	23	/	2014

Transaction ID : SA11AI.69745

Amount of Each Receipt this Period
100.00

B. MR STEVE A GIBBS 114
Full Name (Last, First, Middle Initial)
Mailing Address 16035 121ST AVE

City JAMAICA	State NY	Zip Code 11434
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation UNEMPLOYED
--------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12	/	17	/	2014

Transaction ID : SA11AI.69750

Amount of Each Receipt this Period
100.00

C. MRS THERESA D GIDDENS 328
Full Name (Last, First, Middle Initial)
Mailing Address 801 RIVERS CT

City ORLANDO	State FL	Zip Code 32828
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation NOT EMPLOYED
--------------------------	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12	/	10	/	2014

Transaction ID : SA11AI.69756

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 21 OF 67
(check only one)

<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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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MRS MARY A GILBERT 751
Full Name (Last, First, Middle Initial)
Mailing Address 3713 NABHOLTZ LN
City MESQUITE State TX Zip Code 75150
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 ▼ 700.00

Date of Receipt 12 / 31 / 2014
Transaction ID : SA11AI.69757
Amount of Each Receipt this Period 100.00

B. MRS TRINIDAD R GONZALEZ 760
Full Name (Last, First, Middle Initial)
Mailing Address 920 CARPENTER ST
City AZLE State TX Zip Code 76020
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation NOT EMPLOYED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 10 / 2014
Transaction ID : SA11AI.69780
Amount of Each Receipt this Period 125.00

C. MRS TRINIDAD R GONZALEZ 760
Full Name (Last, First, Middle Initial)
Mailing Address 920 CARPENTER ST
City AZLE State TX Zip Code 76020
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation NOT EMPLOYED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 375.00

Date of Receipt 12 / 16 / 2014
Transaction ID : SA11AI.69781
Amount of Each Receipt this Period -125.00

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**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 22 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS ROBIN M GRAHAM 612
 Full Name (Last, First, Middle Initial)
 Mailing Address 728 39TH AVE
 City EAST MOLINE State IL Zip Code 61244
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : SA11AI.69784
 Amount of Each Receipt this Period
 75.00

B. MRS MARILYN G GRAY 284
 Full Name (Last, First, Middle Initial)
 Mailing Address 1808 MEWS DR
 City WILMINGTON State NC Zip Code 28405
 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 ▼ 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 04 / 2014
Transaction ID : SA11AI.69785
 Amount of Each Receipt this Period
 30.00

C. MS NEVA W GREENE 318
 Full Name (Last, First, Middle Initial)
 Mailing Address 2828 GA HIGHWAY 271
 City ELLAVILLE State GA Zip Code 31806
 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : SA11AI.69787
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	205.00
TOTAL This Period (last page this line number only).....▶	

**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 23 OF 67
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS LINDA N HANNA 957		Date of Receipt M M / D D / Y Y Y Y Y 12 / 01 / 2014 Transaction ID : SA11AI.69810
Mailing Address 624 PINTAIL CT		Amount of Each Receipt this Period 75.00
City EL DORADO HILLS	State CA	Zip Code 95762
FEC ID number of contributing federal political committee. C		
Name of Employer SELF EMPLOYED	Occupation REALTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) B. MR DONALD W HARRIS 904		Date of Receipt M M / D D / Y Y Y Y Y 12 / 12 / 2014 Transaction ID : SA11AI.69823
Mailing Address 1812 NAVY ST		Amount of Each Receipt this Period 250.00
City SANTA MONICA	State CA	Zip Code 90405
FEC ID number of contributing federal political committee. C		
Name of Employer SELF EMPLOYED	Occupation CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

Full Name (Last, First, Middle Initial) C. MR CLAY HARVEY 657		Date of Receipt M M / D D / Y Y Y Y Y 12 / 31 / 2014 Transaction ID : SA11AI.69831
Mailing Address PO BOX 129		Amount of Each Receipt this Period -10.00
City WILLARD	State MO	Zip Code 65781
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ -10.00	

SUBTOTAL of Receipts This Page (optional).....▶	315.00
TOTAL This Period (last page this line number only).....▶	

**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 24 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS KAREN HAYCOX 100
 Full Name (Last, First, Middle Initial)
 Mailing Address 318 E 19TH ST APT 1
 City NEW YORK State NY Zip Code 10003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GOLDMAN SACHS Occupation INVESTMENT BANKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 04 / 2014
Transaction ID : SA11AI.69836
 Amount of Each Receipt this Period
 75.00

B. MS BETH HEATHERLY 790
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 141
 City WILDORADO State TX Zip Code 79098
 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 10 / 2014
Transaction ID : SA11AI.69842
 Amount of Each Receipt this Period
 100.00

C. MR FRANK HILL 731
 Full Name (Last, First, Middle Initial)
 Mailing Address 8109 NW 130TH PL
 City OKLAHOMA CITY State OK Zip Code 73142
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : SA11AI.69865
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	275.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 25 OF 67
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS DORIE HILLIARD 751
 Full Name (Last, First, Middle Initial)
 Mailing Address 1909 VZ COUNTY ROAD 1106
 City CANTON State TX Zip Code 75103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 30 / 2014
Transaction ID : SA11AI.69867
 Amount of Each Receipt this Period
 -150.00

B. MS S SUE HOLMES 805
 Full Name (Last, First, Middle Initial)
 Mailing Address 1111 SANDRA DR
 City JOHNSTOWN State CO Zip Code 80534
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : SA11AI.69891
 Amount of Each Receipt this Period
 75.00

C. MR JOHN M HUNNICUTT 325
 Full Name (Last, First, Middle Initial)
 Mailing Address 4754 HICKORY SHORES BLVD
 City GULF BREEZE State FL Zip Code 32563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer JOHN M HUNNICUTT INSURANCE Occupation INSURANCE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 27 / 2014
Transaction ID : SA11AI.69913
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 25.00
TOTAL This Period (last page this line number only)..... ▶

**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 26 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS SHARON JACOBSEN 586
 Full Name (Last, First, Middle Initial)
 Mailing Address 1240 EMPIRE RD
 City DICKINSON State ND Zip Code 58601
 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 ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : SA11AI.69930
 Amount of Each Receipt this Period
 50.00

B. MS MARGARET JACOBSON 891
 Full Name (Last, First, Middle Initial)
 Mailing Address 1950 CAPO SAN VITO AVE
 City LAS VEGAS State NV Zip Code 89123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation CMF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : SA11AI.69931
 Amount of Each Receipt this Period
 100.00

C. MR ROBERT JAMISON 483
 Full Name (Last, First, Middle Initial)
 Mailing Address 6693 RIDGEVIEW DR
 City CLARKSTON State MI Zip Code 48346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ROBERT JAMISON COMPANY Occupation BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : SA11AI.69933
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 OF 67
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR THOMAS R JOKERST 630
 Full Name (Last, First, Middle Initial)
 Mailing Address 15912 EAGLE CHASE CT
 City CHESTERFIELD State MO Zip Code 63017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CRAWFORD-BUTZ INSURANCE AGENCE Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2014
Transaction ID : SA11AI.69956
 Amount of Each Receipt this Period
 300.00

B. MR DAVID A KAHL 432
 Full Name (Last, First, Middle Initial)
 Mailing Address 1240 NEWBURY DR
 City COLUMBUS State OH Zip Code 43229
 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 ▼ 445.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : SA11AI.69971
 Amount of Each Receipt this Period
 75.00

C. MR ALBERT KILDUFF 210
 Full Name (Last, First, Middle Initial)
 Mailing Address 2103 PULASKI HWY
 City EDGEWOOD State MD Zip Code 21040
 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 ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 10 / 2014
Transaction ID : SA11AI.69983
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 475.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 29 OF 67
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR JAMES W KLINGLER 730
 Full Name (Last, First, Middle Initial)
 Mailing Address 5106 N BEAVER AVE
 City BETHANY State OK Zip Code 73008
 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 ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : SA11AI.70000
 Amount of Each Receipt this Period
 500.00

B. MS MARY G KOEHL 774
 Full Name (Last, First, Middle Initial)
 Mailing Address 1307 MANOR LAKE CT
 City RICHMOND State TX Zip Code 77406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : SA11AI.70013
 Amount of Each Receipt this Period
 50.00

C. MR GEORGE KOWALIK 781
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 39
 City PANNA MARIA State TX Zip Code 78144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer VICE PRESIDENT Occupation PANNA MARIA HISTORICAL SOCIETY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : SA11AI.70022
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 30 OF 67
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR DEAN A KRUMPELMANN 218
 Full Name (Last, First, Middle Initial)
 Mailing Address 140 NENTEGO DR
 City State Zip Code
 FRUITLAND MD 21826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CISCO EASTERN MARYLAND ADMINISTRATOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : SA11AI.70033
 Amount of Each Receipt this Period
 50.00

B. MR ROBERT KURTH 759
 Full Name (Last, First, Middle Initial)
 Mailing Address 403 MANTOOTH AVE
 City State Zip Code
 LUFKIN TX 75904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 FAMILY MEDICINE DOCTOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : SA11AI.70037
 Amount of Each Receipt this Period
 50.00

C. MR STEPHEN LANKHEIT 638
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 128
 City State Zip Code
 CHARLESTON MO 63834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 LANKHEIT FARMS FARMER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 675.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2014
Transaction ID : SA11AI.70061
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**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 31 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR STEPHEN LANKHEIT 638
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 128
 City CHARLESTON State MO Zip Code 63834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LANKHEIT FARMS Occupation FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2014
Transaction ID : SA11AI.70060
 Amount of Each Receipt this Period
 25.00

B. MR JUAN LARA 951
 Full Name (Last, First, Middle Initial)
 Mailing Address 3470 SAN PABLO AVE
 City SAN JOSE State CA Zip Code 95127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Santa Claira Cnty Occupation Sheriff
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 04 / 2014
Transaction ID : SA11AI.70063
 Amount of Each Receipt this Period
 50.00

C. MS JOYCE LEMBERGER 891
 Full Name (Last, First, Middle Initial)
 Mailing Address 10001 SUMMER OAK LN UNIT 102
 City LAS VEGAS State NV Zip Code 89134
 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 ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : SA11AI.70083
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**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 32 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS DOROTHY L LEWIS 956
 Full Name (Last, First, Middle Initial)
 Mailing Address 2415 SHIRLAND PARK PL
 City AUBURN State CA Zip Code 95603
 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 ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2014
Transaction ID : SA11AI.70090
 Amount of Each Receipt this Period
 125.00

B. MS DEBRA R LORZ 988
 Full Name (Last, First, Middle Initial)
 Mailing Address 878 HIGHWAY 7
 City TONASKET State WA Zip Code 98855
 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 ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2014
Transaction ID : SA11AI.70102
 Amount of Each Receipt this Period
 50.00

C. MR JOHN W LYNCH 809
 Full Name (Last, First, Middle Initial)
 Mailing Address 1320 MICHELLE CT
 APT M
 City COLORADO SPRINGS State CO Zip Code 80916
 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 ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : SA11AI.70113
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**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 33 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR TIMOTHY MADDERN 950
 Full Name (Last, First, Middle Initial)
 Mailing Address 1830 CAMPHOR CT
 City MILPITAS State CA Zip Code 95035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TRIMBLE NAVIGATION LTD Occupation DESIGNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2014
Transaction ID : SA11AI.70124
 Amount of Each Receipt this Period
 100.00

B. MS MARIE D MASTERS 548
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 302
 City WEBSTER State WI Zip Code 54893
 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 ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2014
Transaction ID : SA11AI.70160
 Amount of Each Receipt this Period
 75.00

C. MR JAMES C MCGINNIS 066
 Full Name (Last, First, Middle Initial)
 Mailing Address 835 RESERVOIR AVE
 City BRIDGEPORT State CT Zip Code 06606
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 10 / 2014
Transaction ID : SA11AI.70186
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**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 34 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR ORVILLE MCMAHAN 380
 Full Name (Last, First, Middle Initial)
 Mailing Address 30 WEBB MILL BRIDGE RD
 City HORNSBY State TN Zip Code 38044
 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 ▼ 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : SA11Al.70196
 Amount of Each Receipt this Period
 50.00

B. MR EUGENE MICHALSKI 344
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 COCOPLUM CT S
 City HOMOSASSA State FL Zip Code 34446
 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 ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 10 / 2014
Transaction ID : SA11Al.70216
 Amount of Each Receipt this Period
 50.00

C. MR A LAMAR MILLER 363
 Full Name (Last, First, Middle Initial)
 Mailing Address 115 HABERSHAM DR
 City DOTHAN State AL Zip Code 36301
 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 ▼ 380.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2014
Transaction ID : SA11Al.70225
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**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 35 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MS MARILYN J MITSCH 551		Date of Receipt
Mailing Address 4 CHARLEY LAKE CT		<input type="text" value="12"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City	State	Transaction ID : SA11AI.70239
SAINT PAUL	MN	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	Zip Code	<input type="text" value="250.00"/>
	55127	
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MRS MARCIA W MONNIER 454		Date of Receipt
Mailing Address 6985 WEMBLEY CIR		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Transaction ID : SA11AI.70244
DAYTON	OH	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	Zip Code	<input type="text" value="200.00"/>
	45459	
Name of Employer	Occupation	
NONE	HOMEMAKER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="800.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MR TERRY MOORE 650		Date of Receipt
Mailing Address PO BOX 312		<input type="text" value="12"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>
City	State	Transaction ID : SA11AI.70249
LAKE OZARK	MO	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	Zip Code	<input type="text" value="75.00"/>
	65049	
Name of Employer	Occupation	
KELLER WILLIAMS REALTY	REALTOR	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="275.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="525.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 36 OF 67
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MRS MARY K MOORMAN 316
 Full Name (Last, First, Middle Initial)
 Mailing Address 4670 KNIGHTS ACADEMY RD
 City VALDOSTA State GA Zip Code 31605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation BOOKKEEPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : SA11AI.70251
 Amount of Each Receipt this Period
 50.00

B. MR IVAN B MUIR 582
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 74
 City FOREST RIVER State ND Zip Code 58233
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MUIR FARM Occupation FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 10 / 2014
Transaction ID : SA11AI.70268
 Amount of Each Receipt this Period
 75.00

C. MR RONALD P MUNDELL 196
 Full Name (Last, First, Middle Initial)
 Mailing Address 149 JOHNSON LN
 City READING State PA Zip Code 19605
 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 ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : SA11AI.70272
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 37 OF 67
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR BOYD MUNSCH 211
 Full Name (Last, First, Middle Initial)
 Mailing Address 2431 YARMOUTH LN
 City CROFTON State MD Zip Code 21114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GOVERNMENTAL CONSTRUCTION SERVICE Occupation BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2014
Transaction ID : SA11AI.70273
 Amount of Each Receipt this Period
 60.00

B. MR PHILIP NIOSI 329
 Full Name (Last, First, Middle Initial)
 Mailing Address 10 NAVAHO CIR
 City INDIAN HARBOUR BEA State FL Zip Code 32937
 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2014
Transaction ID : SA11AI.70300
 Amount of Each Receipt this Period
 100.00

C. MS NORA NOBLES 757
 Full Name (Last, First, Middle Initial)
 Mailing Address 117 CEDAR LN
 City CHANDLER State TX Zip Code 75758
 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 ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2014
Transaction ID : SA11AI.70301
 Amount of Each Receipt this Period
 75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 235.00
TOTAL This Period (last page this line number only)..... ▶

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 38 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR MICHAEL J NOBLES 758
 Full Name (Last, First, Middle Initial)
 Mailing Address 344 LCR 886
 City State Zip Code
 JEWETT TX 75846
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : SA11AI.70302
 Amount of Each Receipt this Period
 100.00

B. MR WINFORD T NOWELL 018
 Full Name (Last, First, Middle Initial)
 Mailing Address 8 ROLLINS ST
 City State Zip Code
 GROVELAND MA 01834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 04 / 2014
Transaction ID : SA11AI.70308
 Amount of Each Receipt this Period
 100.00

C. MR DERRY L O'CONNELL 129
 Full Name (Last, First, Middle Initial)
 Mailing Address 2226 STATE ROUTE 3
 City State Zip Code
 CADYVILLE NY 12918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED TEACHER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 18 / 2014
Transaction ID : SA11AI.70313
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**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 39 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MRS ELIZABETH OLESON 522
 Full Name (Last, First, Middle Initial)
 Mailing Address 807 4TH ST
 City KALONA State IA Zip Code 52247
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MANFIELD FOUNDATION Occupation CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 30 / 2014
Transaction ID : SA11Al.70317
 Amount of Each Receipt this Period
 150.00

B. MRS PATRICIA A OPEL 433
 Full Name (Last, First, Middle Initial)
 Mailing Address 7845 N ST
 City RUSSELLS POINT State OH Zip Code 43348
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 24 / 2014
Transaction ID : SA11Al.70328
 Amount of Each Receipt this Period
 150.00

C. MRS RUTH B PEMBLETON 853
 Full Name (Last, First, Middle Initial)
 Mailing Address 10101 W PALMERAS DR
 APT 125
 City SUN CITY State AZ Zip Code 85373
 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2014
Transaction ID : SA11Al.70366
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 325.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 40 OF 67
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR GEORGE C PERREAULT 342		Date of Receipt
Mailing Address 7336 CAPTAIN KIDD AVE		<input type="text" value="12"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City	State	Zip Code
SARASOTA	FL	34231
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.70369
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="600.00"/>	

Full Name (Last, First, Middle Initial) B. MS MARY T PHILPIT 334		Date of Receipt
Mailing Address 100 WORTH AVE APT 417		<input type="text" value="12"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City	State	Zip Code
PALM BEACH	FL	33480
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.70384
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	HOMEMAKER	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="275.00"/>	

Full Name (Last, First, Middle Initial) C. MS ELIZABETH W PIRKLE 302		Date of Receipt
Mailing Address 628 LAKEWOOD DR		<input type="text" value="12"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City	State	Zip Code
LAGRANGE	GA	30240
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.70387
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="300.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 41 OF 67
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS BARBARA POKORNEY 707
 Full Name (Last, First, Middle Initial)
 Mailing Address 6140 MORGAN RD
 City GREENWELL SPRINGS State LA Zip Code 70739
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : SA11AI.70395
 Amount of Each Receipt this Period
 75.00

B. MS COY M POWELL 977
 Full Name (Last, First, Middle Initial)
 Mailing Address 2500 SW 83RD ST
 City REDMOND State OR Zip Code 97756
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : SA11AI.70400
 Amount of Each Receipt this Period
 75.00

C. MR ROBERT E POWIS 231
 Full Name (Last, First, Middle Initial)
 Mailing Address 14301 BRANDERMILL WOODS TRL
 APT A104
 City MIDLOTHIAN State VA Zip Code 23112
 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 ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2014
Transaction ID : SA11AI.70401
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**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 42 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS BARBARA E PRESCOTT 219
 Full Name (Last, First, Middle Initial)
 Mailing Address 41 BAYSCAPE DR
 City PERRYVILLE State MD Zip Code 21903
 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 ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 10 / 2014
Transaction ID : SA11AI.70402
 Amount of Each Receipt this Period
 30.00

B. MS DIANNE T PULSE 386
 Full Name (Last, First, Middle Initial)
 Mailing Address 113 E SPRING ST
 City RIPLEY State MS Zip Code 38663
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DIANNE T PULSE ASSOCIATES Occupation MANAGEMENT CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : SA11AI.70409
 Amount of Each Receipt this Period
 100.00

C. MR JOEL QUINN 629
 Full Name (Last, First, Middle Initial)
 Mailing Address 903 ROYAL OAK CT
 City HERRIN State IL Zip Code 62948
 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 ▼ 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2014
Transaction ID : SA11AI.70414
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional).....▶	165.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 43 OF 67
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR JOEL QUINN 629
 Full Name (Last, First, Middle Initial)
 Mailing Address 903 ROYAL OAK CT
 City HERRIN State IL Zip Code 62948
 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 ▼ 335.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2014
Transaction ID : SA11AI.70413
 Amount of Each Receipt this Period
 25.00

B. MR DON RICE 615
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 923
 City TREMONT State IL Zip Code 61568
 FEC ID number of contributing federal political committee. **C**
 Name of Employer COUNTRY FINANCIAL SERVICES Occupation FINANCIAL ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : SA11AI.70452
 Amount of Each Receipt this Period
 100.00

C. MR DAVID S RILLING 293
 Full Name (Last, First, Middle Initial)
 Mailing Address 427 S PETTY ST
 City GAFFNEY State SC Zip Code 29340
 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 ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 04 / 2014
Transaction ID : SA11AI.70463
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 44 OF 67
(check only one)

<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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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MRS PEGGY L ROBERTSON 600

Full Name (Last, First, Middle Initial)
Mailing Address 1406 PLUM CT
APT A

City MOUNT PROSPECT State IL Zip Code 60056

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 ▼ 300.00

Date of Receipt: 11 / 26 / 2014
Transaction ID : SA11Al.70474
Amount of Each Receipt this Period: 100.00

B. MR JAMES F ROBSON 191

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 21901

City PHILADELPHIA State PA Zip Code 19124

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 ▼ 300.00

Date of Receipt: 12 / 19 / 2014
Transaction ID : SA11Al.70478
Amount of Each Receipt this Period: 75.00

C. CHARLESMARLEENE RODGERS 902

Full Name (Last, First, Middle Initial)
Mailing Address 8335 DINSDALE ST

City DOWNEY State CA Zip Code 90240

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 ▼ 300.00

Date of Receipt: 11 / 28 / 2014
Transaction ID : SA11Al.70483
Amount of Each Receipt this Period: 75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00

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

**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 45 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR CARL M RODIA 066
 Full Name (Last, First, Middle Initial)
 Mailing Address 13 LOCUST ST
 City TRUMBULL State CT Zip Code 06611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARL M RODIA & ASSOCIATES BUSINESS OWNER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2014
Transaction ID : SA11AI.70484
 Amount of Each Receipt this Period
 75.00

B. Mr Charles A Roper 920
 Full Name (Last, First, Middle Initial)
 Mailing Address 6733 Cantil St
 City Carlsbad State CA Zip Code 92009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : SA11AI.70493
 Amount of Each Receipt this Period
 50.00

C. MR R EDWARD ROSE 020
 Full Name (Last, First, Middle Initial)
 Mailing Address 13 CLARK RD
 City HINGHAM State MA Zip Code 02043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 ROCKY MOUNTAIN SPRING WATER COMPA VICE PRESIDENT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : SA11AI.70494
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 46 OF 67
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS HELENE H RUSSELL 769
 Full Name (Last, First, Middle Initial)
 Mailing Address 922 ASHFORD DR
 City SAN ANGELO State TX Zip Code 76901
 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 ▼ 325.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : SA11AI.70514
 Amount of Each Receipt this Period
 50.00

B. MRS BEVERLY SCHNEIDER 613
 Full Name (Last, First, Middle Initial)
 Mailing Address 1016 PHEASANT RIDGE LN
 City PRINCETON State IL Zip Code 61356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer L W SCHNEIDER INC Occupation OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : SA11AI.70558
 Amount of Each Receipt this Period
 150.00

C. MR THOMAS A SCHULTZ 530
 Full Name (Last, First, Middle Initial)
 Mailing Address 4445 PILGRIM RD
 City BROOKFIELD State WI Zip Code 53005
 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 ▼ 375.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 05 / 2014
Transaction ID : SA11AI.70569
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**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 47 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MR JOE R SCHUMACHER 973		Date of Receipt
Mailing Address 38838 SHELburn DR		<input type="text" value="12"/> / <input type="text" value="09"/> / <input type="text" value="2014"/>
City	State	Zip Code
SCIO	OR	97374
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.70573
Name of Employer	Occupation	Amount of Each Receipt this Period
JRS FARMS INC	FARMER	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) B. MS HELEN SEIDEL 750		Date of Receipt
Mailing Address 11417 NEW ORLEANS DR		<input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City	State	Zip Code
FRISCO	TX	75035
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.70584
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	Retired	<input type="text" value="25.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="325.00"/>	

Full Name (Last, First, Middle Initial) C. MR JAMES R SHIPP 377		Date of Receipt
Mailing Address 1309 SEAGULL LN		<input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2014"/>
City	State	Zip Code
DANDRIDGE	TN	37725
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.70594
Name of Employer	Occupation	Amount of Each Receipt this Period
LINCARE LLC	RESPIRATORY THERAPIST	<input type="text" value="75.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="425.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="150.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 48 OF 67
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
CONSERVATIVE MAJORITY FUND

A. MRS NANCY SHOUSE 424
 Full Name (Last, First, Middle Initial)
 Mailing Address 1494 TP LUCKETT RD
 City MORGANFIELD State KY Zip Code 42437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 18 / 2014
Transaction ID : SA11AI.70600
 Amount of Each Receipt this Period
 50.00

B. Mr Stanley Sivertson 581
 Full Name (Last, First, Middle Initial)
 Mailing Address 1142 19th St N
 City Fargo State ND Zip Code 58102
 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 ▼ 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : SA11AI.70609
 Amount of Each Receipt this Period
 75.00

C. MS HELEN W SMITH 631
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 221051
 City SAINT LOUIS State MO Zip Code 63122
 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 ▼ 1300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 12 / 2014
Transaction ID : SA11AI.70622
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 49 OF 67
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR EMMETT L SMITH 956
 Full Name (Last, First, Middle Initial)
 Mailing Address 4126 BUCHANAN DR
 City State Zip Code
 FAIR OAKS CA 95628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2014
Transaction ID : SA11AI.70630
 Amount of Each Receipt this Period
 100.00

B. MR DONALD C SMITH 993
 Full Name (Last, First, Middle Initial)
 Mailing Address 502 N ROAD 47
 City State Zip Code
 PASCO WA 99301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SUNRISE FARMS OWNER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : SA11AI.70631
 Amount of Each Receipt this Period
 100.00

C. MS LYNNE STORY 967
 Full Name (Last, First, Middle Initial)
 Mailing Address 479 S PUUNENE AVE
 City State Zip Code
 KAHULUI HI 96732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : SA11AI.70677
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 50 OF 67
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MS DANA C SUN 932
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 276
 City THREE RIVERS State CA Zip Code 93271
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Care Giver SELF EMPLOYED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2014
Transaction ID : SA11AI.70689
 Amount of Each Receipt this Period
 100.00

B. MR DAVID TATGE 917
 Full Name (Last, First, Middle Initial)
 Mailing Address 4591 BRINEY POINT ST
 City LA VERNE State CA Zip Code 91750
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 DANCO ANODIZING BUSINESS OWNER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014
Transaction ID : SA11AI.70697
 Amount of Each Receipt this Period
 30.00

C. MR CHARLES K THOMPSON 258
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 477
 City CRAB ORCHARD State WV Zip Code 25827
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 24 / 2014
Transaction ID : SA11AI.70718
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 230.00
TOTAL This Period (last page this line number only)..... ▶

**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 51 OF 67
<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

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)
CONSERVATIVE MAJORITY FUND

A. MRS JEANNINE TOWNSEND 928
 Full Name (Last, First, Middle Initial)
 Mailing Address 46 FIR VIA
 City ANAHEIM State CA Zip Code 92801
 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 ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : SA11Al.70737
 Amount of Each Receipt this Period
 300.00

B. MS WANDA Y URSINO 980
 Full Name (Last, First, Middle Initial)
 Mailing Address 21060 142ND AVE SE
 City KENT State WA Zip Code 98042
 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 27 / 2014
Transaction ID : SA11Al.70751
 Amount of Each Receipt this Period
 100.00

C. MRS JAN B VANDENBERG 977
 Full Name (Last, First, Middle Initial)
 Mailing Address 61951 KILDONAN CT
 City BEND State OR Zip Code 97702
 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 ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2014
Transaction ID : SA11Al.70755
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional).....▶	330.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 52 OF 67
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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)
CONSERVATIVE MAJORITY FUND

A. MR CHARLES VARSEL 773
 Full Name (Last, First, Middle Initial)
 Mailing Address 7907 ALETA DR
 City SPRING State TX Zip Code 77379
 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 ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : SA11AI.70758
 Amount of Each Receipt this Period
 100.00

B. MR FRED WAGNER 325
 Full Name (Last, First, Middle Initial)
 Mailing Address 532 WYNNEHURST ST
 City PENSACOLA State FL Zip Code 32503
 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 ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2014
Transaction ID : SA11AI.70769
 Amount of Each Receipt this Period
 50.00

C. MS JOANNA WAITE 177
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 52
 City JERSEY SHORE State PA Zip Code 17740
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation NOT EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2014
Transaction ID : SA11AI.70772
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 53 OF 67
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial)
A. MR RON WALL 714

Mailing Address 6204 HIGHWAY 112

City MELDER State LA Zip Code 71433

FEC ID number of contributing federal political committee. **C**

Name of Employer RON WALL TRUCKING LLC Occupation TRUCKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2014
Transaction ID : SA11AI.70779

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. MRS LINDA G WEBB 298

Mailing Address 160 WATERLOO ST SW

City AIKEN State SC Zip Code 29801

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **235.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2014
Transaction ID : SA11AI.70796

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. MR HUGH WEIDEMANN 506

Mailing Address PO BOX 321

City JANESVILLE State IA Zip Code 50647

FEC ID number of contributing federal political committee. **C**

Name of Employer IOWA FURNITURE RESTORATION Occupation SALESMAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2014
Transaction ID : SA11AI.70800

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **200.00**

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 54 OF 67
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR JACOB C WESSNER 195
 Full Name (Last, First, Middle Initial)
 Mailing Address 1585 GRIM RD
 City KUTZTOWN State PA Zip Code 19530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation FLOOR CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2014
Transaction ID : SA11AI.70809
 Amount of Each Receipt this Period
 100.00

B. MR CORNELIUS J WESTERMAN 650
 Full Name (Last, First, Middle Initial)
 Mailing Address 6714 STATE ROUTE C
 City LOHMAN State MO Zip Code 65053
 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2014
Transaction ID : SA11AI.70811
 Amount of Each Receipt this Period
 100.00

C. MS CARRIE E WILSON 410
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 76254
 City HIGHLAND HEIGHTS State KY Zip Code 41076
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : SA11AI.70840
 Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

**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 55 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR CAMERON W WILSON 646
 Full Name (Last, First, Middle Initial)
 Mailing Address RR 3
 BOX 186
 City PRINCETON State MO Zip Code 64673
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2014
Transaction ID : SA11AI.70841
 Amount of Each Receipt this Period
 200.00

B. CLIFTEEN T WITHERS 450
 Full Name (Last, First, Middle Initial)
 Mailing Address 7992 TULIPTREE CIR
 City WEST CHESTER State OH Zip Code 45069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2014
Transaction ID : SA11AI.70850
 Amount of Each Receipt this Period
 35.00

C. MS NOREEN WITTEN 727
 Full Name (Last, First, Middle Initial)
 Mailing Address 48 KENSINGTON DR
 City BELLA VISTA State AR Zip Code 72715
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 25 / 2014
Transaction ID : SA11AI.70851
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	285.00
TOTAL This Period (last page this line number only).....▶	

**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 56 OF 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. MR DENNIS WURZELBACHER 452
 Full Name (Last, First, Middle Initial)
 Mailing Address 3561 W KEMPER RD
 City CINCINNATI State OH Zip Code 45251
 FEC ID number of contributing federal political committee. **C**
 Name of Employer FALLS BUS SERVICE Occupation PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **535.00**

Date of Receipt **12 / 15 / 2014**
Transaction ID : SA11AI.70863
 Amount of Each Receipt this Period **50.00**

B. Mr John Wyss 300
 Full Name (Last, First, Middle Initial)
 Mailing Address 157 Woods Creek Dr
 City Suwanee State GA Zip Code 30024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer USDA Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **225.00**

Date of Receipt **12 / 02 / 2014**
Transaction ID : SA11AI.70867
 Amount of Each Receipt this Period **100.00**

C. MS ANGELA B YALAMANCHILI 770
 Full Name (Last, First, Middle Initial)
 Mailing Address 11204 CYPRESS CT
 City HOUSTON State TX Zip Code 77065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer C&C INVESTMENTS Occupation FINANCIAL ADVISOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **325.00**

Date of Receipt **12 / 01 / 2014**
Transaction ID : SA11AI.70868
 Amount of Each Receipt this Period **75.00**

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 57 OF 67
(check only one)

<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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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. Full Name (Last, First, Middle Initial)
MS JUDITH A YOUNG 454

Mailing Address 4270 SARAHS WAY

City DAYTON State OH Zip Code 45440

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 ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 22 / 2014

Transaction ID : SA11AI.70879

Amount of Each Receipt this Period
100.00

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
 M M / D D / Y Y Y Y Y Y

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
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	14513.00

**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 58 OF 67
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. ACTIVE ENGAGEMENT LLC
Full Name (Last, First, Middle Initial)

Mailing Address 44084 RIVERSIDE PKWY
SUITE 350

City LANSLOWNE State VA Zip Code 20176

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
6292.03

Date of Receipt
12 / 12 / 2014
Transaction ID : SA17.70901

Amount of Each Receipt this Period
713.26

LIST RENTAL INCOME

B. TMA DIRECT INC
Full Name (Last, First, Middle Initial)

Mailing Address 2000 EDMUND HALLEY DR
#250

City RESTON State VA Zip Code 20191

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
18043.89

Date of Receipt
12 / 08 / 2014
Transaction ID : SA17.70889

Amount of Each Receipt this Period
958.00

LIST RENTAL INCOME

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).....▶	1671.26
TOTAL This Period (last page this line number only).....▶	1671.26

**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)

<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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial)

A. ACTIVE ENGAGEMENT LLC

Mailing Address 44084 RIVERSIDE PKWY
SUITE 350

City LANSLOWNE State VA Zip Code 20176

Purpose of Disbursement
PAC eMAIL SOLICITATIONS

003

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 09 / 2014

Transaction ID : **SB21B.69242**

Amount of Each Disbursement this Period

712.50

Full Name (Last, First, Middle Initial)

B. AMBASSADOR ACCOUNTING

Mailing Address 7521 PRESIDENTIAL LN

City MANASSAS State VA Zip Code 20109

Purpose of Disbursement
ESCROW SERVICES

001

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 09 / 2014

Transaction ID : **SB21B.69243**

Amount of Each Disbursement this Period

77.87

Full Name (Last, First, Middle Initial)

C. BAKER & HOSTETLER LLP

Mailing Address PO BOX 70189

City CLEVELAND State OH Zip Code 44190

Purpose of Disbursement
LEGAL SERVICES

001

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2014

Transaction ID : **SB21B.69231**

Amount of Each Disbursement this Period

812.50

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

1602.87

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)

<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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. FIRST MERIT BANK		Date of Disbursement MM / DD / YYYY 11 / 28 / 2014
Mailing Address 295 FIRSTMERIT CIR		Transaction ID : SB21B.70895
City AKRON State OH Zip Code 44307	Amount of Each Disbursement this Period 50.00	
Purpose of Disbursement BANK CHARGES	Category/Type 001	
Candidate Name CONSERVATIVE MAJORITY FUND		
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. FIRST MERIT BANK		Date of Disbursement MM / DD / YYYY 11 / 30 / 2014
Mailing Address 295 FIRSTMERIT CIR		Transaction ID : SB21B.70890
City AKRON State OH Zip Code 44307	Amount of Each Disbursement this Period 4.98	
Purpose of Disbursement BANK CHARGE	Category/Type 001	
Candidate Name CONSERVATIVE MAJORITY FUND		
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. FIRST MERIT BANK		Date of Disbursement MM / DD / YYYY 12 / 04 / 2014
Mailing Address 295 FIRSTMERIT CIR		Transaction ID : SB21B.70894
City AKRON State OH Zip Code 44307	Amount of Each Disbursement this Period 1361.44	
Purpose of Disbursement CREDIT CARD PROCESSING & DISCOUNT FEES	Category/Type 001	
Candidate Name CONSERVATIVE MAJORITY FUND		
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).....▶	1416.42
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)

<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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial)

A. FIRST MERIT BANK

Mailing Address 295 FIRSTMERIT CIR

City AKRON State OH Zip Code 44307

Purpose of Disbursement
ACCOUNT ANALYSIS CHARGE

001

Candidate Name
CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 12 / 2014

Transaction ID : **SB21B.70893**

Amount of Each Disbursement this Period

105.00

Full Name (Last, First, Middle Initial)

B. FIRST MERIT BANK

Mailing Address 295 FIRSTMERIT CIR

City AKRON State OH Zip Code 44307

Purpose of Disbursement
AMEX COLLECTION FEE

001

Candidate Name
CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 26 / 2014

Transaction ID : **SB21B.70892**

Amount of Each Disbursement this Period

25.80

Full Name (Last, First, Middle Initial)

C. FIRST MERIT BANK

Mailing Address 295 FIRSTMERIT CIR

City AKRON State OH Zip Code 44307

Purpose of Disbursement
BANK CHARGES

001

Candidate Name
CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : **SB21B.70896**

Amount of Each Disbursement this Period

358.50

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

489.30

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)

<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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial) A. FIRST MERIT BANK		Date of Disbursement MM / DD / YYYY 12 / 31 / 2014
Mailing Address 295 FIRSTMERIT CIR		Transaction ID : SB21B.70900
City AKRON State OH Zip Code 44307	Amount of Each Disbursement this Period 202.32	
Purpose of Disbursement AMEX DISCOUNT FEE	Category/Type 001	
Candidate Name CONSERVATIVE MAJORITY FUND	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. INFOCISION MANAGEMENT CORP		Date of Disbursement MM / DD / YYYY 12 / 05 / 2014
Mailing Address 325 SPRINGSIDE DR		Transaction ID : SB21B.70897
City AKRON State OH Zip Code 44333	Amount of Each Disbursement this Period 24474.31	
Purpose of Disbursement PAC TELEMARKETING SOLICITATIONS	Category/Type 003	
Candidate Name CONSERVATIVE MAJORITY FUND	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. INFOCISION MANAGEMENT CORP		Date of Disbursement MM / DD / YYYY 12 / 10 / 2014
Mailing Address 325 SPRINGSIDE DR		Transaction ID : SB21B.70898
City AKRON State OH Zip Code 44333	Amount of Each Disbursement this Period 5223.20	
Purpose of Disbursement PAC TELEMARKETING SOLICITATIONS	Category/Type 003	
Candidate Name CONSERVATIVE MAJORITY FUND	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).....▶	29899.83
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)

<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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial)

A. LEO NEMAEUS INC

Mailing Address 1924 - 37TH ST NW

City WASHINGTON State DC Zip Code 20007

Purpose of Disbursement
CONSULTING - MAJOR DONORS

001

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 12 / 2014

Transaction ID : **SB21B.69232**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. MACKENZIE & COMPANY

Mailing Address 2776 S ARLINGTON MILL DR #806

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement
CONSULTING - COMPLIANCE

001

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 10 / 2014

Transaction ID : **SB21B.69233**

Amount of Each Disbursement this Period

3500.00

Full Name (Last, First, Middle Initial)

C. STRATEGIC CAMPAIGN GROUP

Mailing Address 4600 NORTH FAIRFAX DR
SUITE 802

City ARLINGTON State VA Zip Code 22203

Purpose of Disbursement
CONSULTING - MANAGEMENT

001

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 05 / 2014

Transaction ID : **SB21B.69234**

Amount of Each Disbursement this Period

2000.00

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

10500.00

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)

<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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial)

A. STRATEGIC CAMPAIGN GROUP

Mailing Address 4600 NORTH FAIRFAX DR
SUITE 802

City ARLINGTON State VA Zip Code 22203

Purpose of Disbursement
CONSULTING - MAJOR DONOR FUNDRAISING CONTACTS

001

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2014

Transaction ID : SB21B.69235

Amount of Each Disbursement this Period

5987.00

Full Name (Last, First, Middle Initial)

B. WELLS FARGO BANK

Mailing Address 1711 FERN ST

City ALEXANDRIA State VA Zip Code 22302

Purpose of Disbursement
SERVICE CHARGE

001

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 28 / 2014

Transaction ID : SB21B.69236

Amount of Each Disbursement this Period

14.00

Full Name (Last, First, Middle Initial)

C. WELLS FARGO BANK

Mailing Address 1711 FERN ST

City ALEXANDRIA State VA Zip Code 22302

Purpose of Disbursement
DEPOSIT TICKETS

001

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 02 / 2014

Transaction ID : SB21B.69237

Amount of Each Disbursement this Period

35.15

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

6036.15

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)

<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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial)

A. WELLS FARGO BANK

Mailing Address 1711 FERN ST

City ALEXANDRIA State VA Zip Code 22302

Purpose of Disbursement
WIRE TRANSFER FEE

001

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 04 / 2014

Transaction ID : SB21B.69238

Amount of Each Disbursement this Period

15.00

Full Name (Last, First, Middle Initial)

B. WELLS FARGO BANK

Mailing Address 1711 FERN ST

City ALEXANDRIA State VA Zip Code 22302

Purpose of Disbursement
ONLINE DEPOSIT & IMAGE FEE

001

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2014

Transaction ID : SB21B.69239

Amount of Each Disbursement this Period

3.00

Full Name (Last, First, Middle Initial)

C. WELLS FARGO BANK

Mailing Address 1711 FERN ST

City ALEXANDRIA State VA Zip Code 22302

Purpose of Disbursement
SERVICE CHARGE

001

Candidate Name

CONSERVATIVE MAJORITY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2014

Transaction ID : SB21B.69240

Amount of Each Disbursement this Period

14.00

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

32.00

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

49976.57

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

Full Name (Last, First, Middle Initial)

A. CONSERVATIVE MAJORITY SUPERFUND

Date of Disbursement

Mailing Address 2776 S ARLINGTON MILL DR #806

M M M	/	D D D	/	Y Y Y Y Y Y
11		25		2014

City ARLINGTON State VA Zip Code 22206

Transaction ID : SB23.69241

Purpose of Disbursement
CONTRIBUTION

011
Category/ Type

Amount of Each Disbursement this Period

20.00

Candidate Name

CONSERVATIVE MAJORITY FUND

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

Mailing Address

M M M	/	D D D	/	Y Y Y Y Y Y

City State Zip Code

Purpose of Disbursement

Category/ Type

Amount of Each Disbursement this Period

--

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

Mailing Address

M M M	/	D D D	/	Y Y Y Y Y Y

City State Zip Code

Purpose of Disbursement

Category/ Type

Amount of Each Disbursement this Period

--

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

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

20.00

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

20.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 67 OF 67
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
CONSERVATIVE MAJORITY FUND

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor INFOCISION MANAGEMENT CORP	Nature of Debt (Purpose): VOTER CONTACT & SOLICITATION CALLS
Mailing Address 325 SPRINGSIDE DR	
City State Zip Code AKRON OH 44333	

Outstanding Balance Beginning This Period <input type="text" value="14985.62"/>	Transaction ID : SD10.4163	
Amount Incurred This Period <input type="text" value="14711.89"/>	Payment This Period <input type="text" value="29697.51"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="0.00"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>