24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

VANE OF COMMITTEE (In Full) CONSERVATIVE OUTSIDER PAC C	Schedule E) FOR SE OF FORM 24/48					
C Coo614560 Check if						
Full Name of Payes	C	ONSERVATIVE OUTSIDER PAC	C C00614560			
Full Name of Payee Purpose of Expenditure State						
DEL CIELO MEDIA, LLC Mailing Address 1427 LESLIE AVENUE SUITE 102 City State Zip Code ALEXANDRIA VI 22301 Purpose of Expenditure MEDIA PLACEMENT Name of Federal Candidate JOHN RUTHERFORD Galendar Year-To-Date Per Election for Office Sought Category/ Type Date of Disbursement or Obligation Mailing Address Amount Category/ Type Date of Disbursement For: Primary General 2016 Other (specify) ▶ Name of Federal Candidate Date of Public Distribution/Dissemination City State Zip Code Purpose of Expenditure Name of Federal Candidate Category/ Type Name of Federal Candidate Date of Disbursement or Obligation Transaction ID: 24 / 2016 Date of Disbursement or Obligation Transaction ID: 24 / 2	Check if 24-hour report 48-hour report New report Amends report filed on					
Mailing Address 1427 LESLIE AVENUE SUITE 102 City State Zip Code ALEXANDRIA VI 22301 Purpose of Expenditure MeDIA PLACEMENT Name of Federal Candidate JOHN RUTHERFORD Calendar Year-To-Date Per Election for Office Sought City State Zip Code Date of Disbursement or Obligation Date of Disbursement or Obligation Disbursement For: Primary General 2016 Other (specify) Name of Payee Date of Disbursement or Obligation Date of Disbursement or Obligation Date of Disbursement or Obligation Other (specify) Name of Payee Date of Disbursement or Obligation Other (specify) Name of Federal Candidate Support Office Sought: House District: Oppose Calendar Year-To-Date Per Election for Office Sought Disbursement For: Primary General Purpose of Expenditure Category/ Type Name of Federal Candidate Support Office Sought: House District: Oppose President Senate State: Calendar Year-To-Date Per Election for Office Sought Other (specify) Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political parry committee or its agent. BUNIAMIN OTIENIOFF [Electronically Filed] Date Ode Transaction ID: SE 4239 Amount Transaction ID: SE 4239 Transaction ID: SE 42						
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City State Zip Code ALEXANDRIA VI 22301 Purpose of Expenditure MEDIA PLACEMENT Name of Federal Candidate JOHN RUTHERFORD Category/ DHI Name of Federal Candidate JOHN RUTHERFORD Category/ DHI Name of Payee Category/ Full Name of Payee Date of Disbursement or Obligation District: 04 President Senate State: FL Disbursement For: Primary General College of Purpose of Expenditure Category/ Type Date of Disbursement or Obligation Amount City State Zip Code Date of Disbursement or Obligation Date of Disbursement or Obligation Category/ Type Name of Federal Candidate Category/ Type Date of Disbursement or Obligation Date of Disbursement or Obligation Category/ Type District: 04 President Senate State: FL Date of Disbursement For: Primary General Category/ Type Office Sought: House District: Date of Disbursement or Obligation Category/ Type District: President Senate State: Disbursement For: Primary General Disbursement For: Primary General Other (specify) Category/ Type Other (specify) Category/ Type Office Sought: House District: Other Date of Disbursement or Obligation Category/ Type Date of Disbursement or Obligation Category/ Type Date of Disbursement or Obligation Date of Disbursement or Obligation Category/ Type Date of Disbursement or Obligation Color Obligation Category/ Type Date of Disbursement for: Primary Type Date of Disbursement for: Primary Type District: Other (specify) Category/ Type Date of Disbursement for: Primary Type Category/ Type Date of Disbursement for: Primary Type Category/ Type Date of Public Distribution/Dissemination City Type Date of Public Distribution/Dissemination City Type Date of Public Distribution/Dissemination Date of Public Distribution/Dissemination City Type Date of Public Distribution/Dissemination Date of Public Distribution/Dissemination City Type Date of				Amount		
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Name of Federal Candidate Support Office Sought House District: 04		Purpose of Expenditure				
JOHN RUTHERFORD Calendar Year-To-Date Per Election for Office Sought Full Name of Payee City State Category/ Type Name of Federal Candidate Calendar Year-To-Date Purpose of Expenditure Category/ Type Name of Federal Candidate Calendar Year-To-Date Purpose of Expenditure Category/ Type Name of Federal Candidate State: Calendar Year-To-Date Per Election for Office Sought Category/ Type Name of Federal Candidate Support Category/ Type Office Sought: House District: Primary General Calendar Year-To-Date Per Election for Office Sought Calendar Year-To-Date Per Election for Office Sought Other (specify) ▶ Under penalty of perjury 1 certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. BENIAMIN OTTENHOFF [Electronically Filed] Date Date Sught: Primary General						
Calendar Year-To-Date Per Election for Office Sought Full Name of Payee Date of Public Distribution/Dissemination		Name of Federal Candidate	Support Offic	e Sought: X House District: 04		
Per Election for Office Sought 233759.97		JOHN RUTHERFORD	X Oppose	President Senate State: FL		
Full Name of Payee Date of Public Distribution/Dissemination						
Mailing Address Amount City State Zip Code Date of Disbursement or Obligation Purpose of Expenditure Category/ Type Name of Federal Candidate Support Office Sought: House District: Oppose President Senate State: Other (specify) Calendar Year-To-Date Per Election for Office Sought Calendar Year-To-Date Per Election for Office Sought Other (specify) (a) SUBTOTAL of Unitemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures Disbursement For: Primary General Other (specify) Cother (specify) Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. BENIAMIN OTTENHOFF [Electronically Filed] Date Date 25 2016		Full Name of Payee				
City State Zip Code Purpose of Expenditure				M M / D D / Y M Y M Y		
City State Zip Code Date of Disbursement or Obligation		Mailing Address				
Purpose of Expenditure Category/ Type				Amount		
Purpose of Expenditure Category/ Type		City State Z	Zip Code			
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Calendar Year-To-Date Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures						
Per Election for Office Sought Other (specify) ▶ (a) SUBTOTAL of Itemized Independent Expenditures		Calendar Year-To-Date	Disb			
(b) SUBTOTAL of Unitemized Independent Expenditures				Other (specify)		
(b) SUBTOTAL of Unitemized Independent Expenditures						
(c) TOTAL Independent Expenditures		(a) SUBTOTAL of Itemized Independent Expenditures				
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[Electronically Filed] Date 08 25 2016	,	with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political				
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