

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

Conservative Action Fund

ADDRESS (number and street) 717 King Street

STE 300

Check if different than previously reported. (ACC) Alexandria VA 22314

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00496505

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

July 31 Mid-Year Report (Non-election Year Only) (MY)

Termination Report (TER)

(b) Monthly Report Due On:

<input type="checkbox"/> Feb 20 (M2)	<input type="checkbox"/> May 20 (M5)	<input type="checkbox"/> Aug 20 (M8)	<input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)
<input type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
<input type="checkbox"/> Apr 20 (M4)	<input type="checkbox"/> Jul 20 (M7)	<input type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

Primary (12P) General (12G) Runoff (12R)

Convention (12C) Special (12S)

Election on M M M / D D D / Y Y Y Y Y Y in the State of

(d) 30-Day POST-Election Report for the:

General (30G) Runoff (30R) Special (30S)

Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period M M M / D D D / Y Y Y Y Y Y through M M M / D D D / Y Y Y Y Y Y

04 / 01 / 2012 through 06 / 30 / 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Dan Backer Esq.

Signature of Treasurer Dan Backer Esq. [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y

07 / 29 / 2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Conservative Action 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="2012"/>	<input type="text" value="10319.94"/>	<input type="text" value="10319.94"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="20236.89"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="120025.00"/>	<input type="text" value="180520.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="140261.89"/>	<input type="text" value="190839.94"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="136675.96"/>	<input type="text" value="187254.01"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="3585.93"/>	<input type="text" value="3585.93"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="121620.00"/>	

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 Action 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).....	0.00	13750.00
(ii) Unitemized	0.00	125.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	0.00	13875.00
(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)	0.00	13875.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	46620.00
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.).....	120025.00	120025.00
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))..... ▶	120025.00	180520.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	120025.00	180520.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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	0.00	15376.53
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	15376.53
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	49706.40	84907.92
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(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	0.00
29. Other Disbursements	86969.56	86969.56
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)) ..	136675.96	187254.01
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	136675.96	187254.01

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)	0.00	13875.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	13875.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	15376.53
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	15376.53

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA

Transaction ID :

In response to the RFAI dated 07/24/2013, the committee conducted and timely reported an Independent Expenditure on 03/08/2012 for \$26828.50 timely reported on FEC Image# 12952602930. Contributor Shaun McCutcheon made an advance payment of his personal funds for that expenditure on behalf of the committee on 03/07/2012 for \$13,500, as reported on FEC Image# 12952602920, and which indicated the reimbursement to follow in the subsequent reporting period. The subject transaction in this RFAI is that reimbursement.

Form/Schedule:

Transaction ID:

**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 24
(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 Action Fund

A. Shaun McCutcheon
 Full Name (Last, First, Middle Initial)
 Mailing Address 5011 Lake Crest Circle
 City Hoover State AL Zip Code 35226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Coalmont Electrical Occupation General Contractor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 70120.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2012
Transaction ID : SA17.4449
 Amount of Each Receipt this Period
 10000.00

B. Shaun McCutcheon
 Full Name (Last, First, Middle Initial)
 Mailing Address 5011 Lake Crest Circle
 City Hoover State AL Zip Code 35226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Coalmont Electrical Occupation General Contractor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 90120.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 25 / 2012
Transaction ID : SA17.4452
 Amount of Each Receipt this Period
 20000.00

C. Shaun McCutcheon
 Full Name (Last, First, Middle Initial)
 Mailing Address 5011 Lake Crest Circle
 City Hoover State AL Zip Code 35226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Coalmont Electrical Occupation General Contractor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 110120.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2012
Transaction ID : SA17.4450
 Amount of Each Receipt this Period
 20000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 50000.00
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 8 OF 24
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Conservative Action Fund

A. Full Name (Last, First, Middle Initial)
Shaun McCutcheon

Mailing Address 5011 Lake Crest Circle

City Hoover State AL Zip Code 35226

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

Name of Employer Coalmont Electrical Occupation General Contractor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
180120.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 13 / 2012

Transaction ID : SA17.4451

Amount of Each Receipt this Period
70000.00

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).....▶	70000.00
TOTAL This Period (last page this line number only).....▶	120000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Conservative Action Fund

Full Name (Last, First, Middle Initial)

A. Christopher Brown

Mailing Address 3256 Ridgely Drive

City Birmingham State AL Zip Code 35243

Purpose of Disbursement
PAC Mgmt

001

Candidate Name

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
04 / 05 / 2012

Transaction ID : SB29.4456

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Christopher Brown

Mailing Address 3256 Ridgely Drive

City Birmingham State AL Zip Code 35243

Purpose of Disbursement
PAC Mgmt

001

Candidate Name

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
05 / 06 / 2012

Transaction ID : SB29.4463

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Christopher Brown

Mailing Address 3256 Ridgely Drive

City Birmingham State AL Zip Code 35243

Purpose of Disbursement
PAC Mgmt

001

Candidate Name

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
06 / 04 / 2012

Transaction ID : SB29.4468

Amount of Each Disbursement this Period

5000.00

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

15000.00

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Conservative Action Fund

Full Name (Last, First, Middle Initial)

A. DB Capitol Strategies PLLC

Mailing Address PO BOX 75021

City Washington State DC Zip Code 20003

Purpose of Disbursement
Legal services

001

Candidate Name

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
04 / 01 / 2012

Transaction ID : SB29.4454

Amount of Each Disbursement this Period

1350.00

Full Name (Last, First, Middle Initial)

B. DB Capitol Strategies PLLC

Mailing Address PO BOX 75021

City Washington State DC Zip Code 20003

Purpose of Disbursement
Legal services

001

Candidate Name

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
04 / 15 / 2012

Transaction ID : SB29.4460

Amount of Each Disbursement this Period

1350.00

Full Name (Last, First, Middle Initial)

C. DB Capitol Strategies PLLC

Mailing Address PO BOX 75021

City Washington State DC Zip Code 20003

Purpose of Disbursement
Legal services

001

Candidate Name

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
05 / 10 / 2012

Transaction ID : SB29.4464

Amount of Each Disbursement this Period

1350.00

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

4050.00

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Conservative Action Fund

Full Name (Last, First, Middle Initial)

A. DB Capitol Strategies PLLC

Mailing Address PO BOX 75021

City Washington State DC Zip Code 20003

Purpose of Disbursement
Legal services

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 07 / 2012

Transaction ID : SB29.4469

Amount of Each Disbursement this Period

1350.00

Full Name (Last, First, Middle Initial)

B. Erin E Eckert

Mailing Address 85 John Street
Apt. 11H

City New York State NY Zip Code 10038

Purpose of Disbursement
design work

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 19 / 2012

Transaction ID : SB29.4484

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

C. Forward Focus Media

Mailing Address

City State Zip Code

Purpose of Disbursement
media consulting

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 26 / 2012

Transaction ID : SB29.4466

Amount of Each Disbursement this Period

3500.00

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

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

5450.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Conservative Action Fund

Full Name (Last, First, Middle Initial)

A. Jefferson County Republican Party

Mailing Address 4710 Champions Trace
Suite 104

City Louisville State KY Zip Code 40218

Purpose of Disbursement
State party state account contribution (Golf Tournament)

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.4471

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Shaun McCutcheon

Mailing Address 5011 Lake Crest Circle

City Hoover State AL Zip Code 35226

Purpose of Disbursement
Reimbursement of 03/07/12 payment made on behalf of PAC

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.4496

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. NMB Research LLC

Mailing Address 206 N. Fayette St.

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Research

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.4491

Amount of Each Disbursement this Period

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

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Conservative Action Fund

Full Name (Last, First, Middle Initial)

A. Premiere Speakers Bureau

Mailing Address 109 International Drive
Suite 300

City Franklin State TN Zip Code 37067

Purpose of Disbursement
Booking event speaker

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB29.4493

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Red State Strategies, LLC

Mailing Address P.O. BOX 43564

City Birmingham State AL Zip Code 35243

Purpose of Disbursement
Media consulting

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB29.4482

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Red State Strategies, LLC

Mailing Address P.O. BOX 43564

City Birmingham State AL Zip Code 35243

Purpose of Disbursement
Media consulting

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB29.4488

Amount of Each Disbursement this Period

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

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Conservative Action Fund

Full Name (Last, First, Middle Initial)

A. Red State Strategies, LLC

Mailing Address P.O. BOX 43564

City Birmingham State AL Zip Code 35243

Purpose of Disbursement
Media consulting

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 25 / 2012

Transaction ID : SB29.4489

Amount of Each Disbursement this Period

366.24

Full Name (Last, First, Middle Initial)

B. Smith & Wollensky

Mailing Address 1112 19th Street NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Travel

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2012

Transaction ID : SB29.4462

Amount of Each Disbursement this Period

515.90

Full Name (Last, First, Middle Initial)

C. US Airways

Mailing Address

City Atlanta State GA Zip Code 85034

Purpose of Disbursement
travel

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 15 / 2012

Transaction ID : SB29.4480

Amount of Each Disbursement this Period

480.20

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

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

1362.34

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Conservative Action Fund

Full Name (Last, First, Middle Initial)

A. Verizon Wireless

Mailing Address

City Birmingham State AL Zip Code 35243

Purpose of Disbursement
telecom

001

Candidate Name

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
06 / 11 / 2012

Transaction ID : SB29.4473

Amount of Each Disbursement this Period

247.48

Full Name (Last, First, Middle Initial)

B. Washington Political Group

Mailing Address 5061 Hodgkins Place

City Lilburn State GA Zip Code 30047

Purpose of Disbursement
polling

001

Candidate Name

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
04 / 15 / 2012

Transaction ID : SB29.4458

Amount of Each Disbursement this Period

4871.52

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

Amount of Each Disbursement this Period

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

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

5119.00

86558.12

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Conservative Action Fund** Transaction ID : **SC/10.4103**

LOAN SOURCE Full Name (Last, First, Middle Initial) Shaun McCutcheon	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 5011 Lake Crest Circle	
City Hoover State AL ZIP Code 35226	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
35000.00	0.00	35000.00

TERMS

Date Incurred: MM / DD / YYYY / / Date Due: MM / DD / YYYY / / Interest Rate: % (apr) Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)..... ▶	35000.00
TOTALS This Period (last page in this line only)..... ▶	<input type="text"/>
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SC/10

Transaction ID : SC/10.4103

(Current loan amount of 35000.00 from a balance of 35000.00 has been forgiven)

Form/Schedule:

Transaction ID:

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Conservative Action Fund** Transaction ID : SC/10.4295

LOAN SOURCE Full Name (Last, First, Middle Initial) Shaun McCutcheon	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 5011 Lake Crest Circle	
City Hoover State AL ZIP Code 35226	

Original Amount of Loan 20000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 20000.00
-------------------------------------	------------------------------------	---

TERMS

Date Incurred: MM / DD / YYYY (08 / 12 / 2011) Date Due: MM / DD / YYYY (12/31/2011) Interest Rate: 0.00 % (apr) Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....▶	[] 20000.00
TOTALS This Period (last page in this line only).....▶	[]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SC/10

Transaction ID : SC/10.4295

(Current loan amount of 20000.00 from a balance of 20000.00 has been forgiven)

Form/Schedule:

Transaction ID:

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Conservative Action Fund** Transaction ID : SC/10.4296

LOAN SOURCE Full Name (Last, First, Middle Initial) Shaun McCutcheon	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 5011 Lake Crest Circle	
City Hoover State AL ZIP Code 35226	

Original Amount of Loan 20000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 20000.00
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TERMS

Date Incurred MM / DD / YYYY 09 / 09 / 2011	Date Due MM / DD / YYYY 12/31/2011	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---	--	-------------------------------	---

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....▶	[] 20000.00
TOTALS This Period (last page in this line only).....▶	[]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SC/10

Transaction ID : SC/10.4296

(Current loan amount of 20000.00 from a balance of 20000.00 has been forgiven)

Form/Schedule:

Transaction ID:

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Conservative Action Fund** Transaction ID : SC/10.4424

LOAN SOURCE Full Name (Last, First, Middle Initial) Shaun McCutcheon	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 5011 Lake Crest Circle	
City Hoover State AL ZIP Code 35226	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
46620.00	0.00	46620.00

TERMS

Date Incurred: MM / DD / YYYY / / Date Due: MM / DD / YYYY / / Interest Rate: % (apr) Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional).....▶	46620.00
TOTALS This Period (last page in this line only).....▶	121620.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SC/10

Transaction ID : SC/10.4424

(Current loan amount of 46620.00 from a balance of 46620.00 has been forgiven)

Form/Schedule:

Transaction ID:

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Conservative Action Fund	FEC IDENTIFICATION NUMBER ▼ C C00496505
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee BrabenderCox LLC		Date MM / DD / YYYY 06 / 13 / 2012
Mailing Address 1218 Grandview Ave		Amount 49706.40
City Pittsburgh	State PA	
Zip Code 15211	Transaction ID : SE.4445	
Purpose of Expenditure Production, Distribution of Radio ad	Category/Type 004	Office Sought: <input checked="" type="checkbox"/> House State: OK <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MARKWAYNE MULLIN		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 49706.40		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee		Date MM / DD / YYYY
Mailing Address		Amount
City	State	
Zip Code	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
Purpose of Expenditure	Category/Type	Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Calendar Year-To-Date Per Election for Office Sought		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	49706.40
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	49706.40

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.

Dan Backer Esq.

[Electronically Filed]

Date

MM / DD / YYYY
07 / 29 / 2013

Signature