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Image# 201907299151857583

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM	3X	For Oth	er Than	An Authoriz	ed Comm	ittee		Office Us	se Only	
1. NAME OF COMMITT	EE (in full)	TYPE O	R PRINT V	_	xample: If ty		12FE4N	15		
CONSER	VATIVE MA	JORIT	/ FUND)						
ADDRESS (nur	mber and street)	2776 5	SARLINGT	ON MILL DR #80)6					
than p	c if different previously ed. (ACC)	ARLIN	NGTON				VA	22206	<u> </u>	
2. FEC IDEN	NTIFICATION N	UMBER	•	CITY 🛦			STATE 🛦		ZIP COD	DE 🛦
C co	0524454			3. IS THIS REPOR		NEW (N) OR		MENDED A)		
(Choose O	F REPORT ne) erly Reports:	R	lonthly eport ue On:	Feb 20 (M Mar 20 (M	13)	May 20 (M5) Jun 20 (M6) Jul 20 (M7)	Se	g 20 (M8) p 20 (M9) t 20 (M10)	ĕ	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE)
	opril 15 Quarterly Report (0 uly 15 Quarterly Report (0 October 15	(6)	PRE-E		Primary (1	12P)	Genera Special	l (12G)		Runoff (12R)
J	Quarterly Report (0 anuary 31 'ear-End Report (\			Election on	M M	/ D D /	Y Y Y		in the State of	
r F	uly 31 Mid-Year Report (Non-election Year Only) (MY)	on (d)	POST-	Election for the:	General (30G)	Runoff	(30R)		Special (30S)
	ermination Report TER)	t		Election on	M = M	/ D D /	Y = Y = Y = Y		in the State of	
5. Covering F	Period 0		01	2019	througl	n 06	30	201		
-	nave examined the	MÁCK	t and to th		nowledge an	d belief it is tru	ue, correct a	nd complet	te.	
Signature of Tr	easurer	CKENZIE, S	SCOTT B, , ,		[Electronic	cally Filed]	Date 07	M / D 29		2019
NOTE: Submiss	ion of false, erron	neous, or i	ncomplete	information may	subject the p	person signing th	nis Report to	the penaltie	es of 52	U.S.C. § 30109
Office Use	:								FORI Rev. 05/20	

FEC Form 3X (Rev. 05/2016)	SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS	Page 2
Write or Type Committee Name		
CONSERVATIVE MAJORITY FUN	ND	
Report Covering the Period: From:	11 01 2019 To:	06 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
S. (a) Cash on Hand January 1, 2019	[25306.25
(b) Cash on Hand at Beginning of Reporting Period	25306.25	
(c) Total Receipts (from Line 19)	113387.65	113387.65
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	138693.90	138693.90
7. Total Disbursements (from Line 31)	110046.76	110046.76
3. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	28647.14	28647.14
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)	30444.88	
This committee has qualified as a multical	andidate committee. (see FEC FORM 1M)	
	For further information contact:	
	Federal Election Commission 999 E Street, NW Washington, DC 20463	

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

CONSERVATIVE MAJORITY FUND

Report Covering the Period: From: 01	01 2019 T	o: 06 30 2019
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	22222.22	
(i) Itemized (use Schedule A)	20620.00	20620.00
(ii) Unitemized	92384.22	92384.22
(ii) Unitemized(iii) TOTAL (add	0200 1122	02001122
Lines 11(a)(i) and (ii)	113004.22	113004.22
E11100 11(a)(i) and (ii)	45 45 45 45 45 45 45 45 45 45 45 45 45 4	4 4
(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	440004.00	442004.00
Totals to Line 33, page 5)▶	113004.22	113004.22
. Transfers From Affiliated/Other		0.00
Party Committees	0.00	0.00
. All Loans Received	0.00	0.00
All Loans neceived	4 4	4 4
Loan Repayments Received	0.00	0.00
Offsets To Operating Expenditures	0.00	4
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
. Refunds of Contributions Made	4 4	4 4
to Federal Candidates and Other		
Political Committees	0.00	0.00
. Other Federal Receipts		
(Dividends, Interest, etc.)	383.43	383.43
. 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
(a) Tatal Transfers (add 40(a) and 40(b))	2.22	
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	113387.65	113387.65
_	7 - 7 - 1 - 7 -	7 7 7
. Total Federal Receipts	110007.05	
(subtract Line 18(c) from Line 19)▶	113387.65	113387.65

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Jaistina. Tour to Butto
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating	4 4 4	
Expenditures	39846.34	39846.34
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	39846.34	39846.34
. Transfers to Affiliated/Other Party		
CommitteesContributions to	0.00	0.00
Federal Candidates/Committees and Other Political Committees	0.00	0.00
Independent Expenditures (use Schedule E)	70200.42	70200.42
Coordinated Party Expenditures (52 U.S.C. § 30116(d))	70200.42	70200.42
(use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
	4 4	0.00
Loans Made Refunds of Contributions To:	0.00	0.00
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
	4 1 1 1 1 1 1 1	
(b) Political Party Committees	0.00	0.00
(such as PACs)	0.00	0.00
(d) Total Contribution Refunds		
(add Lines 28(a), (b), and (c))▶	0.00	0.00
Other Disbursements (Including		
Non-Federal Donations)	0.00	0.00
Federal Election Activity (52 U.S.C. § 30101(2) (a) Allocated Federal Election Activity (from Schedule H6)	20))	
(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
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	110046.76	110046.76
Total Federal Disbursements	45 45 1 45 1 45 1	4 4
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	440040 70	
1011 Line 01/	110046.76	110046.76

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	113004.22	113004.22
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	113004.22	113004.22
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	39846.34	39846.34
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	39846.34	39846.34

FOR LINE NUMBER:					AGE 6	OF	67
	(ch	eck only	one)				
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	Statements may not be sold or used by any personal or used by any personal or used by any political committee to					
NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY F	FUND					
Full Name of Individual (Last, First, Middle In ALLYN 986, JAMES F, , MR, Mailing Address 110 W MCKINLEY ST	itial) or Full Organization Name	Date of Receipt				
City	State Zip Code	04 15 2019 Transaction ID : SA11Al.6442				
GOLDENDALE	WA 98620	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	100.00				
Name of Employer (for Individual) A&A BUILDING SUPPLY CO	Occupation (for Individual) CEO	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00					
Full Name of Individual (Last, First, Middle In ARCHER 774, LYNNE, , MS, Mailing Address 20 SAINT PETERS WALK	itial) or Full Organization Name	Date of Receipt				
		01 16 2019				
City SUGAR LAND	State Zip Code TX 77479	Transaction ID : SA11AI.6108 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	500.00				
Name of Employer (for Individual) ARCHER KIA/VOLKSWAGEN	Occupation (for Individual) AUTO DEALER	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00					
Full Name of Individual (Last, First, Middle In ARCHER 774, LYNNE, , MS,	itial) or Full Organization Name	Date of Receipt				
Mailing Address 20 SAINT PETERS WALK		04 01 2019				
City SUGAR LAND	State Zip Code TX 77479	Transaction ID : SA11AI.6090 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	100.00				
Name of Employer (for Individual) ARCHER KIA/VOLKSWAGEN	Occupation (for Individual) AUTO DEALER	Memo Item				
Receipt For: Primary General	Aggregate Year-to-Date ▼					
Other (specify)	600.00					
SUBTOTAL of Receipts This Page (optional)		700.00				
TOTAL This Period (last page this line number	only)					

FOR LINE NUMBER:					PAGE	7	OF	67	
	(che	eck only							
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Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or ne name and address of any po	used by any person plitical committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY	FUND					
ARCHER 774, LYNNE, , MS,						
Mailing Address 20 SAINT PETERS WALK			04 25 2019			
City	State Zip Code		Transaction ID : SA11AI.6144			
SUGAR LAND	TX 77479		Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		500.00			
Name of Employer (for Individual) ARCHER KIA/VOLKSWAGEN	Occupation (for Indivi	idual)	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	1100.00				
Full Name of Individual (Last, First, Middle III) ARCHER 774, LYNNE, , MS,	nitial) or Full Organization Name	е	Date of Receipt			
Mailing Address 20 SAINT PETERS WALK		06 17 / 2019				
City SUGAR LAND	State Zip Code 77479		Transaction ID : SA11Al.6035 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		500.00			
Name of Employer (for Individual) ARCHER KIA/VOLKSWAGEN	Occupation (for Indivi	idual)	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	1600.00				
Full Name of Individual (Last, First, Middle II) C. ARMSTRONG 748, ARTHUR D,	nitial) or Full Organization Name	Э	Date of Receipt			
Mailing Address 18401 SE 149TH ST			06 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City NEWALLA	State Zip Code 74857		Transaction ID : SA11AI.5456 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		55.00			
Name of Employer (for Individual) NONE	Occupation (for Indivi	idual)	Memo Item			
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	240.00				
SUBTOTAL of Receipts This Page (optional)		>	1055.00			
TOTAL This Period (last page this line numbe	r only)					

FOR LINE NUMBER:						PAGE	8	OF	67	
	(check only one)									
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	Statements may not be sold or used by any pers he name and address of any political committee to					
NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY	FUND					
Full Name of Individual (Last, First, Middle BAKER 577, DAN W, , MR,	Initial) or Full Organization Name	Date of Receipt				
Mailing Address 325 STUMER RD		01 11 2019				
City	State Zip Code	Transaction ID : SA11AI.5949				
RAPID CITY	SD 57701	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	250.00				
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item				
NONE	RETIRED	_				
Receipt For:	Aggregate Year-to-Date ▼					
Primary General	riggiogalo Tourito Dullo					
Other (specify) ▼	250.00					
Full Name of Individual (Last, First, Middle BEASON 773, JOHN W, , MR,		Date of Receipt				
Mailing Address 1440 BRAZOS DR APT 159)	M M / D D / Y Y Y Y				
City	Ctata Zin Cada	02 14 2019				
City	State Zip Code TX 77320	Transaction ID : SA11AI.6362				
HUNTSVILLE	TX 77320	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	300.00				
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00					
Full Name of Individual (Last, First, Middle BEASON 773, JOHN W, , MR,	Initial) or Full Organization Name	Date of Receipt				
Mailing Address 1440 BRAZOS DR APT 15	9	05 14 2019				
City	State Zip Code	Transaction ID : SA11Al.6404				
HUNTSVILLE	TX 77320	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	300.00				
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	Memo Item				
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify)	600.00					
SUBTOTAL of Receipts This Page (optional).		850.00				
TOTAL This Period (last page this line number	er only)					

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	for commercial purposes, other than using the n									
$\overline{\ }$	NAME OF COMMITTEE (In Full)									
\rangle	CONSERVATIVE MAJORITY FU	IND								
Α.	Full Name of Individual (Last, First, Middle Initial BERRY 112, YVONNE R, , MS,	l) or F	ull Orga	anization Name		Date of Receipt				
	Mailing Address 1019 VAN SICLEN AVE APT 5J					04 10 2019				
	City	State	Э	Zip Code		Transaction ID : SA11AI.5137				
	BROOKLYN	NY		11207		Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С				125.00				
	Name of Employer (for Individual) NONE		Occupa	ation (for Individual)		Memo Item				
	Receipt For:	Aggra	gato Vo	ar-to-Date ▼						
	Primary General	Aggre	yale le	ai-iu-Daie v						
	Other (specify) ▼	L		250.	.00					
В.	Full Name of Individual (Last, First, Middle Initial BERRY 112, YVONNE R, , MS,	l) or F	ull Orga	anization Name		Date of Receipt				
	Mailing Address 1019 VAN SICLEN AVE APT 5J					04 25 2019				
	City	State	Э	Zip Code		Transaction ID : SA11AI.5118				
	BROOKLYN	NY		11207		Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С]	125.00					
	Name of Employer (for Individual) NONE		Occupa RETIR	ation (for Individual) ED		Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggre	gate Ye	ar-to-Date ▼	2.00					
<u>.</u> С.	Full Name of Individual (Last, First, Middle Initial BERRY 112, YVONNE R, , MS,	l) or F	ull Orga	anization Name		Date of Receipt				
	Mailing Address 1019 VAN SICLEN AVE APT 5J					06 28 2019				
	City	State	Э	Zip Code		Transaction ID : SA11AI.5115				
	BROOKLYN	NY		11207		Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С				125.00				
	Name of Employer (for Individual) NONE		Occupa RETIRI	ation (for Individual)		Memo Item				
	Receipt For:	Agare	gate Ye	ar-to-Date ▼						
	Primary General Other (specify)		J	500	.00					
S	UBTOTAL of Receipts This Page (optional)					375.00				
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FOR LINE NUMBER: PAGE 10 OF 67 Use separate schedule(s) for each category of the Detailed Summary Page

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	y information copied from such Reports and State for commercial purposes, other than using the na								
\rangle	NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FU	ND							
۸.	Full Name of Individual (Last, First, Middle Initial) BLALOCK 797, MARITHA, , Mrs, Mailing Address 3717 STATE HIGHWAY 137	or Full Orgar	nization Name	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
	City STANTON	State TX	Zip Code 79782	Transaction ID : SA11AI.6293 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee. Name of Employer (for Individual)	Occupat	ion (for Individual)	3000.00 Memo Item					
	BLALOCK RANCH Receipt For: Primary General Other (specify) ▼	ER ur-to-Date ▼ 3000.00							
3.	Full Name of Individual (Last, First, Middle Initial) BROWNING 028, ROBERT S, , MR, Mailing Address 309 GREENWICH AVE APT C21		nization Name	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
	City WARWICK FEC ID number of contributing federal political committee.	State RI	Zip Code 02886	Transaction ID : SA11AI.7587 Amount of Each Receipt this Period 500.00					
	Name of Employer (for Individual) DISCHARGED FROM ARMY Receipt For:	1	tion (for Individual) LED VET	Memo Item					
	Primary General Other (specify) ▼	A A	500.00						
Э.	Full Name of Individual (Last, First, Middle Initial) BROWNING 028, ROBERT S, , MR Mailing Address 309 GREENWICH AVE APT C21	,	nization Name	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
	City WARWICK	State RI	Zip Code 02886	Transaction ID : SA11AI.7586 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		505.00 Memo Item					
	Name of Employer (for Individual) DISCHARGED FROM ARMY Receipt For: Primary General Other (specify)	Occupat DISABL Aggregate Yea		Memo item					
s	UBTOTAL of Receipts This Page (optional)		>	4005.00					
Т	OTAL This Period (last page this line number onl	y)	>						

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Any information copied from such Reports and or for commercial purposes, other than using the	Statements may ne name and addre	not be sold or used by any pe ess of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY	FUND							
Full Name of Individual (Last, First, Middle Ir BUCCELLA 021, ANTONETTA, , MS,	nitial) or Full Orga	nization Name	Date of Receipt					
Mailing Address 1124 BENNINGTON ST			02 15 2019					
City	State	Zip Code	Transaction ID : SA11AI.5839					
BOSTON	MA	02128	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		105.00					
Name of Employer (for Individual) NONE	Occupat RETIRE	tion (for Individual) ED	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 210.00						
Full Name of Individual (Last, First, Middle Ir CAMPBELL 161, SCOTT T, , MR, Mailing Address PO BOX 607	nitial) or Full Orga	nization Name	Date of Receipt					
			06 21 2019					
City	State	Zip Code	Transaction ID : SA11AI.4711					
W MIDDLESEX	PA	16159	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		405.00					
Name of Employer (for Individual) SEMI RETIRED	· · · ·	tion (for Individual) EMPLOYED	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 405.00						
Full Name of Individual (Last, First, Middle Ir		nization Name	Date of Receipt					
Mailing Address 4 CALLE ANACUA	, 1110,		06 14 2019					
City BROWNSVILLE	State TX	Zip Code 78520	Transaction ID : SA11AI.6273					
	1/4	10020	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		50.00					
Name of Employer (for Individual) CARDENAS DEVELOPMENT COMPANY	Occupat DEVELO	tion (for Individual) OPER	Memo Item					
Receipt For: Primary General	Aggregate Yea	ar-to-Date ▼						
Other (specify)	7	250.00						
SUBTOTAL of Receipts This Page (optional)			560.00					
TOTAL This Period (last page this line number	r only)							

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	Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.										
	NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FU	JND									
Α.	Full Name of Individual (Last, First, Middle Initial CARRIKER 198, ANNE, , MRS,	al) or Full Org	ganization Name	Date of Receipt							
	Mailing Address 1702 TALLEY RD			01 08 2019							
	City	State	Zip Code	Transaction ID : SA11AI.4747							
	WILMINGTON	DE	19803	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		500.00							
	Name of Employer (for Individual) NONE	Memo Item									
	Receipt For: Primary General Other (specify) ▼										
В.	Full Name of Individual (Last, First, Middle Initial CASWELL 600, MARGARET G, , MS		ganization Name	Date of Receipt							
	Mailing Address 160 SHERIDAN RD City	State	Zip Code	03 27 2019							
		IL	60043	Transaction ID : SA11AI.6211							
	FEC ID number of contributing federal political committee.	С	60043	Amount of Each Receipt this Period 250.00							
	Name of Employer (for Individual) SELF EMPLOYED		pation (for Individual) SONAL INVESTOR	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Primary General Aggregate real-to-Date V									
<u>с.</u>	Full Name of Individual (Last, First, Middle Initial CASWELL 600, MARGARET G, , N		ganization Name	Date of Receipt							
	Mailing Address 160 SHERIDAN RD	·		05 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y							
	City KENILWORTH	State IL	Zip Code 60043	Transaction ID : SA11AI.6212							
			00043	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		200.00							
	Name of Employer (for Individual) SELF EMPLOYED		oation (for Individual) SONAL INVESTOR	Memo Item							
	Receipt For:	Aggregate Y	ear-to-Date ▼								
	Primary General Other (specify)	Primary General Aggregate Teal-to-Date V									
S	SUBTOTAL of Receipts This Page (optional)		>	950.00							
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C.

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: (check only one) **X** 11a 11b 11c

67 PAGE 13 OF Use separate schedule(s) ITEMIZED RECEIPTS for each category of the 12 Detailed Summary Page 13 14 15 16 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 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name CLAIBORNE 707, WALTER, , MR, Date of Receipt Mailing Address 14217 CLAIBORNE RD 2019 City State Zip Code Transaction ID: SA11AI.4962 LA **BATCHELOR** 70715 Amount of Each Receipt this Period FEC ID number of contributing C 150.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) SELF EMPLOYED **REAL ESTATE** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** COX 769, JOAN C, , MS, Date of Receipt Mailing Address 6101 GRAND COURT RD 01 2019 **APT 158** City State Zip Code Transaction ID: SA11AI.7770 SAN ANGELO TX 76901 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) NONE **RETIRED** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500.00

		, ,	
Full Name of Individual (Last, First, Middle In COX 769, JOAN C, , MS,	Date of Receipt		
Mailing Address 6101 GRAND COURT RD APT 158			05 03 2019
City	State	Zip Code	Transaction ID : SA11AI.7798
SAN ANGELO	TX	76901	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		300.00
Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item
NONE	RETI	RED	
Receipt For: Primary General Other (specify)	Aggregate \	Year-to-Date ▼	
UDTOTAL of Passints This Pass (autional)			950.00

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

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

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FOR LINE NUMBER: PAGE 14 OF 67 Use separate schedule(s) for each category of the Detailed Summary Page

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Any information copied from such Reports and sor for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY I	FUND		
Full Name of Individual (Last, First, Middle In CUETO 331, MARIA E, , MS, Mailing Address 1931 SW 14TH TER	nitial) or Full Organiz	ation Name	Date of Receipt
			02 25 2019
City	l	ip Code	Transaction ID : SA11AI.6204
MIAMI		33145	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		500.00
Name of Employer (for Individual) FAMILY BUSINESS		n (for Individual) TATE BROKER	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to	to-Date ▼ 500.00	
Full Name of Individual (Last, First, Middle In DELLE 371, STEVEN D, , , Mailing Address 408 NESBITT LN	nitial) or Full Organiz	ation Name	Date of Receipt
			05 06 2019
City		ip Code	Transaction ID : SA11AI.5427
MADISON	LIN	37115	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		150.00
Name of Employer (for Individual) SELF EMPLOYED	Occupation SURVEYE	n (for Individual) ER	Memo Item
Receipt For: Primary General	Aggregate Year-to	o-Date ▼	
Other (specify) ▼		300.00	
Full Name of Individual (Last, First, Middle In DONAT 566, RANDEE, , MS,	nitial) or Full Organiz	ation Name	Date of Receipt
Mailing Address 1609 26TH AVE NW			06 11 2019
City BAUDETTE		ip Code 56623	Transaction ID : SA11AI.6759
FEC ID number of contributing			Amount of Each Receipt this Period
federal political committee.	[C]		100.00
Name of Employer (for Individual) BAYVIEW LODGE	Occupation MANAGER	n (for Individual) R	Memo Item
Receipt For:	Aggregate Year-to		
Primary General Other (specify)		250.00	
SUBTOTAL of Receipts This Page (optional)			750.00
TOTAL This Period (last page this line number	only)		

FOR LINE NUMBER: PAGE 15 OF Use separate schedule(s) for each category of the (check only one) **X** 11a 11b 11c

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Any information copied from such Reports and or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY		
Full Name of Individual (Last, First, Middle In EAGLE 928, JOHN, , MR,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 1235 N KRAEMER BLVD		06 24 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.6374
ANAHEIM	CA 92806	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	110.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00]
Full Name of Individual (Last, First, Middle In EICHENBAUM 301, SUMIE, , ,		Date of Receipt
Mailing Address 5060 GOVERNORS WALK I	אע	05 02 2019
City	State Zip Code	Transaction ID : SA11Al.8484
CANTON	GA 30115	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00]
Full Name of Individual (Last, First, Middle Inc. EICHENBAUM 301, SUMIE, , ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 5060 GOVERNORS WALK	DR	06 02 Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
City	State Zip Code	Transaction ID : SA11AI.8305
CANTON	GA 30115	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	Memo Item
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify)	300.00]
SUBTOTAL of Receipts This Page (optional)		210.00
TOTAL This Period (last page this line number	r only)	

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	Statements may not be sold or used by any per the name and address of any political committee								
NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUND									
Full Name of Individual (Last, First, Middle EWASYSHYN 483, FRANK J, , MR, Mailing Address 5545 MURFIELD DR	Initial) or Full Organization Name	Date of Receipt							
		06 21 2019							
City ROCHESTER	State Zip Code MI 48306	Transaction ID : SA11AI.7856							
FEC ID number of contributing federal political committee.	C 40000	Amount of Each Receipt this Period							
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼								
Full Name of Individual (Last, First, Middle FLORES 790, JOE, , MR,	Initial) or Full Organization Name	Date of Receipt							
City	Mailing Address PO BOX 147 City State Zip Code								
STRATFORD									
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 300.00							
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00								
Full Name of Individual (Last, First, Middle C. FLORES 790, JOE, , MR,	Initial) or Full Organization Name	Date of Receipt							
Mailing Address PO BOX 147		04 17 2019							
City STRATFORD	State Zip Code 79084	Transaction ID : SA11AI.6754 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C	100.00							
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	Memo Item							
Receipt For: Primary General	Aggregate Year-to-Date ▼								
Other (specify)	400.00								
SUBTOTAL of Receipts This Page (optional).		500.00							
TOTAL This Period (last page this line number	er only)								

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		y any person for the purpose of soliciting contributions ommittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY	FUND	
Full Name of Individual (Last, First, Middle FRUIT 531, YVONNE, , MS, Mailing Address 2309 WOODFIELD CIR	Initial) or Full Organization Name	Date of Receipt
City	State Zip Code	04 26 2019
WAUKESHA	WI 53188	Transaction ID : SA11AI.4912
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220	.00
Full Name of Individual (Last, First, Middle FRUIT 531, YVONNE, , MS, Mailing Address 2309 WOODFIELD CIR	Date of Receipt	
	06 20 2019	
City	Transaction ID : SA11AI.4911	
WAUKESHA FEC ID number of contributing federal political committee.	WI 53188	Amount of Each Receipt this Period 55.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 275	3.00
Full Name of Individual (Last, First, Middle GAVIN 334, NORMAN, , MR,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 364 EAGLE DR		04 08 2019
City JUPITER	State Zip Code S3477	Transaction ID : SA11AI.4493
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	Memo Item
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	300	.00
SUBTOTAL of Receipts This Page (optional).		315.00
TOTAL This Period (last page this line number	er only)	

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EMIZED RECEIPTS	for each category of the Detailed Summary Page	(cne	11a 13	11b 14		11c 15		12 16		17
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Ar 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 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name HARRIS-GILLHAM 740, LACINDA, , MS, Date of Receipt Mailing Address 141 SPUNKY CREEK DR 2019 04 City Zip Code State Transaction ID: SA11AI.7128 OK CATOOSA 74015 Amount of Each Receipt this Period FEC ID number of contributing C 400.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. HELMERICH 741, PEGGY V, , MS, Date of Receipt Mailing Address 2121 S YORKTOWN AVE 2019 APT 12 City State Zip Code Transaction ID: SA11AI.4440 OK **TULSA** 74114 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) NONE **HOMEMAKER** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. HOLTZ 331, ABEL, , MR, Date of Receipt Mailing Address 9999 COLLINS AVE 01 2019 PH 3B City State Zip Code Transaction ID: SA11AI.7516 FL **BAL HARBOUR** 33154 Amount of Each Receipt this Period FEC ID number of contributing C 200.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) NONE **RETIRED** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 1100.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

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

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for each category of the 12 Detailed Summary Page 13 14 15 16 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 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name HOOKER 764, ALICE J, , MS, Date of Receipt Mailing Address PO BOX 2049 2019 24 City Zip Code State Transaction ID: SA11AI.7762 TX **ALBANY** 76430 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **RETIRED** NONE Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. KUBALL 491, VIRGINIA L, , MS, Date of Receipt Mailing Address 3017 JOHNSON RD 06 17 2019 LOT 4 City State Zip Code Transaction ID: SA11AI.7877 **STEVENSVILLE** MI 49127 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) NONE **RETIRED** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. LAUQUAN 114, AVIS, , MS, Date of Receipt Mailing Address 10151 106TH ST 29 2019 City Zip Code State Transaction ID: SA11AI.4789 NY **OZONE PARK** 11416 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) NONE **RETIRED** Receipt For: Aggregate Year-to-Date ▼ Primary General 275.00 Other (specify) 1150.00 SUBTOTAL of Receipts This Page (optional).....

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Detailed Summary Page 13 14 15 16 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 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name LAUQUAN 114, AVIS, , MS, Date of Receipt Mailing Address 10151 106TH ST 15 2019 City Zip Code State Transaction ID: SA11AI.4788 NY OZONE PARK 11416 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) **RETIRED** NONE Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. LESSIG 212, RICHARD B, , MR, Date of Receipt Mailing Address 13 ADMIRAL BLVD 06 2019 City State Zip Code Transaction ID: SA11AI.5262 **BALTIMORE** MD 21222 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) NONE **RETIRED** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. MADERA 781, LELA, , MS, Date of Receipt Mailing Address 187 GEORGE STRAIT 80 2019 City State Zip Code Transaction ID: SA11AI.4894 TX **CANYON LAKE** 78133 Amount of Each Receipt this Period FEC ID number of contributing C 175.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) NONE **RETIRED** Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) 375.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Any information copied from such Reports and or for commercial purposes, other than using the	Statements may ne name and add	not be sold or used by any pedress of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY	FUND						
Full Name of Individual (Last, First, Middle In MEULEMAN 833, MICHAEL, , MR, Mailing Address 314 B ST	nitial) or Full Org	anization Name	Date of Receipt				
maining Address 314 B S1			02 12 2019				
City							
RUPERT	ID	83350	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	205.00					
Name of Employer (for Individual) NONE							
Receipt For: Primary General Other (specify) ▼	Primary General Aggregate real-to-bate •						
Full Name of Individual (Last, First, Middle In MEULEMAN 833, MICHAEL, , MR Mailing Address 314 B ST	Date of Receipt						
0.1	02 15 2019						
City RUPERT							
FEC ID number of contributing federal political committee.	C	00000	Amount of Each Receipt this Period 205.00				
Name of Employer (for Individual) NONE	Occup RETIF	pation (for Individual)	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 510.00					
Full Name of Individual (Last, First, Middle III) MEULEMAN 833, MICHAEL, , N		anization Name	Date of Receipt				
Mailing Address 314 B ST			03 25 2019				
City RUPERT	State ID	Zip Code 83350	Transaction ID : SA11AI.7258				
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 250.00				
Name of Employer (for Individual) NONE	Occup RETIR	nation (for Individual)	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate Ye	ear-to-Date ▼ 760.00					
SUBTOTAL of Receipts This Page (optional)		·····	660.00				
TOTAL This Period (last page this line numbe	r only)						

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NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY I	FUND					
Full Name of Individual (Last, First, Middle In MEULEMAN 833, MICHAEL, , MR, Mailing Address 314 B ST	nitial) or Full Orga	anization Name	Date of Receipt			
			04 24 2019			
City	State	Zip Code	Transaction ID : SA11AI.7256			
RUPERT	ID	83350	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		100.00			
Name of Employer (for Individual) NONE						
Receipt For: Primary General Other (specify) ▼	Aggregate Ye					
Full Name of Individual (Last, First, Middle In MEULEMAN 833, MICHAEL, , MR, Mailing Address 314 B ST	Date of Receipt					
	05 17 2019					
City						
RUPERT	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	410.00				
Name of Employer (for Individual) NONE	Occupa RETIR	ation (for Individual) EED	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 1270.00				
Full Name of Individual (Last, First, Middle In		anization Name	Date of Receipt			
Mailing Address 16 STONE CAMP TRL			06 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City WINONA LAKE	State IN	Zip Code 46590	Transaction ID : SA11AI.7918			
FEC ID number of contributing		10000	Amount of Each Receipt this Period			
federal political committee.	C		400.00			
Name of Employer (for Individual) DANE & MARY LOUISE MILLER FOUNDATION	Memo Item					
Receipt For: Primary General	_ Aggregate rear-to-bate •					
Other (specify)						
SUBTOTAL of Receipts This Page (optional)		>	910.00			
TOTAL This Period (last page this line number	· only)					

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Any information copied from such Reports and or for commercial purposes, other than using the	Statements may ne name and addr	not be sold or used by any peress of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY	FUND						
Full Name of Individual (Last, First, Middle In NATION 760, DAVID I, , MR, Mailing Address 1404 BRIARWOOD BLVD	nitial) or Full Orga	nization Name	Date of Receipt				
Maining Address 1404 BRIARWOOD BLVD			03 04 2019				
City							
ARLINGTON	TX	76013	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		300.00				
Name of Employer (for Individual) NONE							
Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ar-to-Date ▼ 300.00					
Full Name of Individual (Last, First, Middle In NATION 760, DAVID I, , MR, Mailing Address 1404 BRIARWOOD BLVD	nitial) or Full Orga	nization Name	Date of Receipt				
Maning Modross 1404 BRIARWOOD BLVD			06 04 2019				
City	State	Zip Code 76013	Transaction ID : SA11AI.5543				
ARLINGTON	TX	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		300.00				
Name of Employer (for Individual) NONE	Occupa RETIR	ation (for Individual) ED	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 600.00					
Full Name of Individual (Last, First, Middle In		nization Name	Date of Receipt				
Mailing Address 54 HARDING AVE	·,		06 17 2019				
City	State	Zip Code	Transaction ID : SA11AI.5290				
BUFFALO	NY	14217	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		100.00				
Name of Employer (for Individual) NONE	Occupa RETIRE	ation (for Individual) ED	Memo Item				
Receipt For:	Aggregate Ye	ar-to-Date ▼					
Primary General Other (specify)	4	300.00					
SUBTOTAL of Receipts This Page (optional)	,	>	700.00				
TOTAL This Period (last page this line numbe	r only)						

FOR LINE NUMBER:					PAGE	2	24 OF	=	67	
(0	(check only one)									
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		by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY	FUND	
Full Name of Individual (Last, First, Middle In ORT 549, GERALD, , , Mailing Address N2531 RUSTIC DR		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City CLINTONVILLE	State Zip Code 54929	Transaction ID : SA11AI.7946
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ORT LUMBER	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	0.00
Full Name of Individual (Last, First, Middle In ORT 549, GERALD, , , Mailing Address N2531 RUSTIC DR	nitial) or Full Organization Name	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	Transaction ID : SA11AI.7931	
CLINTONVILLE	WI 54929	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	105.00
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ORT LUMBER	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	5.00
Full Name of Individual (Last, First, Middle In PERKINS 836, EDWIN R, , MR,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 358 E TRAILSIDE DR		04 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City EAGLE	State Zip Code 83616	Transaction ID : SA11AI.6807 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) UNKNOWN	Occupation (for Individual) UNKNOWN	Memo Item
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	250	0.00
SUBTOTAL of Receipts This Page (optional)		260.00
TOTAL This Period (last page this line numbe	r only)	

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

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Any information copied from such Reports and or for commercial purposes, other than using	d Statements may no the name and addre	ot be sold or used by any pe ess of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY	′ FUND				
Full Name of Individual (Last, First, Middle PERKINS 836, EDWIN R, , MR,	Initial) or Full Organ	nization Name	Date of Receipt		
Mailing Address 358 E TRAILSIDE DR			04 26 2019		
City	State	Zip Code	Transaction ID : SA11AI.6806		
EAGLE	ID	83616	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		50.00		
Name of Employer (for Individual) UNKNOWN	OWN UNKNOWN				
Receipt For: Primary General Other (specify) ▼					
Full Name of Individual (Last, First, Middle REDDY 062, VIVIAN G, , MRS,	Initial) or Full Organ	nization Name	Date of Receipt		
Mailing Address 223 N SHORE RD			05 01 2019		
City	Transaction ID : SA11AI.4984				
DAYVILLE	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		150.00		
Name of Employer (for Individual) NONE	Occupat RETIRE	ion (for Individual) ED	Memo Item		
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	r-to-Date ▼ 250.00			
Full Name of Individual (Last, First, Middle REYES 208, JOSEPH A, , MR,	Initial) or Full Organ	nization Name	Date of Receipt		
Mailing Address 10712 ALLOWAY DR			02 13 2019		
City POTOMAC	State MD	Zip Code 20854	Transaction ID : SA11AI.4365		
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 250.00		
Name of Employer (for Individual) OWNER	Occupati CUTLER	Memo Item			
Receipt For: Primary General	Aggregate Yea	r-to-Date ▼			
Other (specify)	4	250.00			
SUBTOTAL of Receipts This Page (optional)		>	450.00		
TOTAL This Period (last page this line numb	per only)				

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	d Statements may not be sold or used by any per the name and address of any political committee				
NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY	′ FUND				
Full Name of Individual (Last, First, Middle REYES 208, JOSEPH A, , MR,	Initial) or Full Organization Name	Date of Receipt			
Mailing Address 10712 ALLOWAY DR		05 13 2019			
City	State Zip Code	Transaction ID : SA11AI.4364			
POTOMAC	MD 20854	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	250.00			
Name of Employer (for Individual) OWNER					
Receipt For: Primary General Other (specify) ▼	Primary General Aggregate Year-to-Date Y				
Full Name of Individual (Last, First, Middle RUNNEBOHM 461, NICHOLAS,		Date of Receipt			
Mailing Address 3177 SOUTH 375 EAST	02 09 2019				
City	State Zip Code	Transaction ID : SA11AI.8459			
SHELBYVILLE	IN 46176	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	500.00			
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	Memo Item			
Receipt For: Primary General	Aggregate Year-to-Date ▼				
Other (specify) ▼	500.00				
Full Name of Individual (Last, First, Middle SAHDALA 330, ROBERT M, , N		Date of Receipt			
Mailing Address 9521 JOHNSON ST		04 29 2019			
City HOLLYWOOD	State Zip Code FL 33024	Transaction ID : SA11AI.5157 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	100.00			
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	Memo Item			
Receipt For:	Aggregate Year-to-Date ▼				
Primary General Other (specify)	300.00				
SUBTOTAL of Receipts This Page (optional)	<u> </u>	850.00			
TOTAL This Period (last page this line numb	per only)				

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Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be sold or used by any p the name and address of any political committe	person for the purpose of soliciting contributions e to solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY	′ FUND			
Full Name of Individual (Last, First, Middle SHAW 024, ROBERT, , MR,	Initial) or Full Organization Name	Date of Receipt		
Mailing Address 126 LANGDON ST		04 08 2019		
City	State Zip Code	Transaction ID : SA11AI.5201		
NEWTON	MA 02458	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	y .			
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	Memo Item		
Receipt For: Primary General Other (specify) ▼				
Full Name of Individual (Last, First, Middle SHAW 024, ROBERT, , MR, Mailing Address 126 LANGDON ST	Initial) or Full Organization Name	Date of Receipt		
	05 02 2019			
City NEWTON	Transaction ID : SA11AI.5203			
FEC ID number of contributing federal political committee.	MA 02458	Amount of Each Receipt this Period 100.00		
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	Memo Item		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00			
Full Name of Individual (Last, First, Middle STRUIKSMA 907, MARVIN J, ,		Date of Receipt		
Mailing Address 18360 SUMMER AVE		06 14 2019		
City ARTESIA	State Zip Code CA 90701	Transaction ID : SA11AI.4558 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	245.00		
Name of Employer (for Individual) WEST COAST SANDS INC	Occupation (for Individual) MANAGER	Memo Item		
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 245.00			
SUBTOTAL of Receipts This Page (optional)		445.00		
TOTAL This Period (last page this line numb	er only)			

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Any information copied from such Reports and or for commercial purposes, other than using the	Statements may ne name and add	not be sold or used by any pe lress of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY	FUND					
Full Name of Individual (Last, First, Middle II STUDEMAN 490, KENNETH J, , MR,		anization Name	Date of Receipt			
Mailing Address 65523 N CENTERVILLE RD)		04 24 2019			
City	State	Zip Code	Transaction ID : SA11AI.6152			
STURGIS	MI	49091	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		300.00			
Name of Employer (for Individual) NONE	Occupa RETIR	ation (for Individual)	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 300.00				
Full Name of Individual (Last, First, Middle III) STUDEMAN 490, KENNETH J, , N Mailing Address 65523 N CENTERVILLE RD	ЛR,	anization Name	Date of Receipt			
	Mailing Address 65523 N CENTERVILLE RD					
City	Transaction ID : SA11Al.6151					
STURGIS	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		300.00			
Name of Employer (for Individual) NONE	Occup RETIR	ation (for Individual) RED	Memo Item			
Receipt For:	Aggregate Ye	ear-to-Date ▼				
Primary General Other (specify) ▼	4	600.00				
Full Name of Individual (Last, First, Middle I		anization Name	Date of Receipt			
Mailing Address 1850 SMOKE TREE LN			05 06 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City PALM SPRINGS	State CA	Zip Code 92264	Transaction ID : SA11AI.5185			
FEC ID number of contributing			Amount of Each Receipt this Period			
federal political committee.	C		1000.00			
Name of Employer (for Individual) R & R BROADCASTING		ation (for Individual) A EMPLOYEE	Memo Item			
Receipt For: Primary General	Aggregate Ye	ear-to-Date ▼				
Primary General Other (specify)		1000.00				
SUBTOTAL of Receipts This Page (optional)			1600.00			
TOTAL This Period (last page this line numbe	r only)					

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Any information copied from such Reports and or for commercial purposes, other than using the			person for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY	FUND		
Full Name of Individual (Last, First, Middle In SUPPLE 922, ROZENE R, , MRS, Mailing Address 1850 SMOKE TREE LN	nitial) or Full Orga	anization Name	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID : SA11AI.5184
PALM SPRINGS	CA	92264	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer (for Individual) R & R BROADCASTING	'	ation (for Individual) LEMPLOYEE	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ar-to-Date ▼ 1250.00	
Full Name of Individual (Last, First, Middle Ir TERRELL 391, LESTER R, , MR,	nitial) or Full Orga	anization Name	Date of Receipt
Mailing Address PO BOX 494	06 11 2019		
City MAGEE	State MS	Zip Code 39111	Transaction ID : SA11AI.6269
FEC ID number of contributing federal political committee.	С	33111	Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupa RETIR	ation (for Individual)	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ar-to-Date ▼ 300.00]
Full Name of Individual (Last, First, Middle In TRACY 882, FRANCIS, , MR,	nitial) or Full Orga	anization Name	Date of Receipt
Mailing Address PO BOX 868			04 / 22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City CARLSBAD	State NM	Zip Code 88221	Transaction ID : SA11AI.7206 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		150.00
Name of Employer (for Individual) NONE	Occupa RETIRE	ation (for Individual) ED	Memo Item
Receipt For: Primary General	Aggregate Ye	ar-to-Date ▼	
Other (specify)	7	300.00	
SUBTOTAL of Receipts This Page (optional)			500.00
TOTAL This Period (last page this line number	r only)		

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	Statements may not be sold or used by any pe he name and address of any political committee	
NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY	FUND	
Full Name of Individual (Last, First, Middle ITRACY 882, FRANCIS, , MR, Mailing Address PO BOX 868 City CARLSBAD FEC ID number of contributing federal political committee. Name of Employer (for Individual) NONE Receipt For: Primary General Other (specify)	Date of Receipt M M M	
Full Name of Individual (Last, First, Middle I WILLIAMS 781, THOMAS, , MRS, Mailing Address PO BOX 127 City SCHERTZ FEC ID number of contributing federal political committee. Name of Employer (for Individual) NONE Receipt For: Primary General Other (specify) Other (specify)	State Zip Code TX 78154 C Occupation (for Individual) HOMEMAKER Aggregate Year-to-Date 250,00	Date of Receipt 03 18 2019 Transaction ID: SA11AL4927 Amount of Each Receipt this Period 100.00 Memo Item
Full Name of Individual (Last, First, Middle I WILLIAMS 781, THOMAS, , MR Mailing Address PO BOX 127 City SCHERTZ FEC ID number of contributing federal political committee. Name of Employer (for Individual) NONE Receipt For: Primary General Other (specify)		Date of Receipt M M M / 25
SUBTOTAL of Receipts This Page (optional)	>	300.00
TOTAL This Period (last page this line number	er only)	

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(check only one)											
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Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any perse name and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY F	FUND					
Full Name of Individual (Last, First, Middle In WILLIAMS 781, THOMAS, , MRS, Mailing Address PO BOX 127	Date of Receipt					
City	State Zip Code	04 30 2019 Transaction ID : SA11AI.4925				
SCHERTZ	TX 78154	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	-				
Full Name of Individual (Last, First, Middle In WILLIAMS 917, JOHN F, , MR, Mailing Address PO BOX 2528						
City	State Zip Code	05 21 2019 Transaction ID : SA11AI.7007				
CHINO	CA 91708	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00					
Full Name of Individual (Last, First, Middle In	itial) or Full Organization Name	Date of Receipt				
Mailing Address		M = M / D = D / Y = Y = Y				
City	State Zip Code	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C					
Name of Employer (for Individual)	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼					
SUBTOTAL of Receipts This Page (optional)		100.00				
TOTAL This Period (last page this line number	only)	20620.00				

	FOR LINE NUMBER:						PAGE				
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for each category of the Detailed Summary Page			11a		11b		11c		12		
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not be sold or used by any person for the purpose of soliciting contributions ress of any political committee to solicit contributions from such committee.											

	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										
Α.	Full Name of Individual (Last, First, Middle Initia TMA DIRECT INC	al) or Full Org	anization Name	Date of Receipt							
	Mailing Address 1900 RESTON METRO PLAZA SUITE 600 City	02 28 2019 Transaction ID : SA17.8532									
	RESTON	State VA	Zip Code 20190	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		383.43							
	Name of Employer (for Individual)	Occup	ation (for Individual)	Memo Item LIST RENTAL INCOME							
	Receipt For: Primary General Other (specify) ▼										
В.	Full Name of Individual (Last, First, Middle Initial Mailing Address	Date of Receipt									
	City										
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period							
	Name of Employer (for Individual)	ation (for Individual)	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼								
<u> </u>	Full Name of Individual (Last, First, Middle Initia	Date of Receipt									
	Mailing Address	M = M / D = D / Y = Y = Y									
	City	State	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.										
	Name of Employer (for Individual)	Memo Item									
	Receipt For: Primary General Other (specify)										
5	SUBTOTAL of Receipts This Page (optional)		•	383.43							
Т	OTAL This Period (last page this line number o	only)		383.43							

TEMIZED DISBURSEMENTS	Use separate sched	lule(s) /ahaal/ ar	FOR LINE NUMBER: PAGE 33 OF (check only one)					
	for each category of Detailed Summary F	f the	22 23 26 27					
Any information copied from such Reports and State or for commercial purposes, other than using the na								
NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FU	ND							
Full Name (Last, First, Middle Initial) - ANEDOT			Date of Disbursement					
Mailing Address 1920 McKINNEY AVE 7TH FLOOR			06 30 2019					
City DALLAS	State Zip Code 75201		FEC Identification Number					
Purpose of Disbursement CREDIT CARD PROCESSING FEES		001	C C00524454 Transaction ID : SB21B.4258					
Candidate Name CONSERVATIVE MAJORITY FUI Office Sought: House Disburse		Category/ Type	Amount of Each Disbursement this Period 260.68					
Senate President	ement For: Primary Gen Other (specify) ▼	eral	Memo Item					
State: District: Full Name (Last, First, Middle Initial) BAKER HOSTETLER LLP	Date of Disbursement							
Mailing Address 1050 CONNECTICUT AVE NW SUITE 1100	01 02 2019							
City WASHINGTON Purpose of Disbursement	FEC Identification Number C C00524454							
LEGAL SERVICES Candidate Name CONSERVATIVE MAJORITY FU	ND	Category/ Type	Transaction ID : SB21B.4128 Amount of Each Disbursement this Period					
Office Sought: House Disburse Senate President	ement For: Primary Gen		2500.00					
State: District:	Other (specify)		Memo Item					
Full Name (Last, First, Middle Initial) - BAKER HOSTETLER LLP	Date of Disbursement							
Mailing Address 1050 CONNECTICUT AVE NW SUITE 1100		03 01 2019						
City WASHINGTON	State Zip Code 20036)	FEC Identification Number					
Purpose of Disbursement LEGAL SERVICES Candidate Name	C C00524454 Transaction ID : SB21B.4129 Amount of Each Disbursement this Period							
CONSERVATIVE MAJORITY FU Office Sought: House Disburse Senate President	eral	1000.00 Memo Item						
State: District:			I Mento rent					

SCHEDULE B (FEC Form 3X)	Use sens	rate schedule(s)	FOR LINE NUMBER: PAGE 34 OF						
TEMIZED DISBURSEMENTS	for each	category of the Summary Page	(check only 21b 28a	one) 22 23 26 27 28b 28c 29 30b					
Any information copied from such Reports and State or for commercial purposes, other than using the national state.									
NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUN	ND								
Full Name (Last, First, Middle Initial) A. BAKER HOSTETLER LLP				Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
SUITE 1100	Mailing Address 1050 CONNECTICUT AVE NW SUITE 1100								
City WASHINGTON Purpose of Disbursement	State DC	Zip Code 20036		FEC Identification Number					
LEGAL SERVICES Candidate Name			001 Category/	C C00524454 Transaction ID: SB21B.4130 Amount of Each Disbursement this Period					
CONSERVATIVE MAJORITY FUN Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spec	☐ General	Type	1000.00 Memo Item					
Full Name (Last, First, Middle Initial) B. BAKER HOSTETLER LLP Mailing Address 1050 CONNECTICUT AVE NW				Date of Disbursement 05 01 02019					
SUITE 1100	State	Zip Code		FFO Identification Number					
WASHINGTON Purpose of Disbursement LEGAL SERVICES	DC	20036	001	FEC Identification Number C C00524454 Transaction ID : SB21B.4131					
Candidate Name CONSERVATIVE MAJORITY FUN Office Sought: House Disburse	ND ment For:		Category/ Type	Amount of Each Disbursement this Period					
Senate President State: District:	Primary Other (spec	General		Memo Item					
Full Name (Last, First, Middle Initial) C. CAPITALONE BANK				Date of Disbursement					
Mailing Address 1680 CAPITAL ONE DR				01 04 2019					
City MCLEAN Purpose of Disbursement	State VA	Zip Code 22102		FEC Identification Number					
BANK FEE: BOFA INTERCHNG FEE Candidate Name CONSERVATIVE MAJORITY FUI	ND	[001 Category/ Type	C C00524454 Transaction ID : SB21B.4158 Amount of Each Disbursement this Period					
Office Sought: House Disburse Senate	ment For: Primary	General		210.60 Memo Item					

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 35 O (check only one)					
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 28a	22 23 26 27 28b 28c 29 30b				
Any information copied from such Reports and State or for commercial purposes, other than using the na							
NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FU	ND						
Full Name (Last, First, Middle Initial) A. CAPITALONE BANK			Date of Disbursement				
Mailing Address 1680 CAPITAL ONE DR			01 04 2019				
City MCLEAN	State Zip Code VA 22102		FEC Identification Number				
Purpose of Disbursement BANK FEE: MERCHANT SERVICE CHARGE Candidate Name		001	C C00524454 Transaction ID : SB21B.4162				
CONSERVATIVE MAJORITY FU	ND ement For:	Category/ Type	Amount of Each Disbursement this Period 224.88				
Senate President	Primary General Other (specify) ▼		Memo Item				
Full Name (Last, First, Middle Initial) 3. CAPITALONE BANK	,						
Mailing Address 1680 CAPITAL ONE DR	01 08 2019						
City MCLEAN Purpose of Disbursement		FEC Identification Number					
Candidate Name CONSERVATIVE MAJORITY FU	ND	001 Category/ Type	Transaction ID: SB21B.4163 Amount of Each Disbursement this Period				
Office Sought: House Disburs Senate President	ement For: Primary General		20.00				
State: District:	Other (specify)		Memo Item				
Full Name (Last, First, Middle Initial) CAPITALONE BANK	Date of Disbursement						
Mailing Address 1680 CAPITAL ONE DR			01 16 2019				
City MCLEAN	State Zip Code VA 22102		FEC Identification Number				
Purpose of Disbursement BANK FEE: ACCOUNT ANALYSIS Candidate Name CONSERVATIVE MAJORITY FU	001 Category/	C C00524454 Transaction ID : SB21B.4151 Amount of Each Disbursement this Period					
Office Sought: House Disburs Senate President	Туре	152.09					
	Other (specify) ▼		Memo Item				

SCHEDULE B (FEC Form 3X)	Use separate schedule(s	FOR LINE NUMBER: PAGE 36 (check only one)						
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 28a	22 23 26 27 28b 28c 29 30b					
Any information copied from such Reports and Statem or for commercial purposes, other than using the name								
NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUN								
Full Name (Last, First, Middle Initial) A. CAPITALONE BANK			Date of Disbursement					
Mailing Address 1680 CAPITAL ONE DR	Mailing Address 1680 CAPITAL ONE DR							
MCLEAN	State Zip Code VA 22102		FEC Identification Number					
Purpose of Disbursement BANK FEE: BOFA COLLECTION FEE Candidate Name		001	C C00524454 Transaction ID : SB21B.4142					
CONSERVATIVE MAJORITY FUNI Office Sought: House Disbursem		Category/ Type	Amount of Each Disbursement this Period 7.95					
	Primary General Other (specify) ▼		Memo Item					
Full Name (Last, First, Middle Initial) B. CAPITALONE BANK			Date of Disbursement					
Mailing Address 1680 CAPITAL ONE DR	02 04 2019							
MCLEAN	State Zip Code VA 22102		FEC Identification Number					
Purpose of Disbursement BANK FEE: BOFA INTERCHNG FEE Candidate Name		001 Category/	C C00524454 Transaction ID : SB21B.4140 Amount of Each Disbursement this Period					
CONSERVATIVE MAJORITY FUN Office Sought: House Disbursem		Type	385.65					
Senate	Primary General Other (specify)		Memo Item					
Full Name (Last, First, Middle Initial) C. CAPITALONE BANK								
Mailing Address 1680 CAPITAL ONE DR		02 04 2019						
MCLEAN	State Zip Code VA 22102		FEC Identification Number					
Purpose of Disbursement BANK FEE: BOFA DISCOUNT FEE Candidate Name CONSERVATIVE MAJORITY FUN	ND	001 Category/ Type	C C00524454 Transaction ID: SB21B.4153 Amount of Each Disbursement this Period					
	nent For: Primary General Other (specify) ▼		37.40					
State: District:			Memo Item					
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only).			431.00					

SCHEDULE B (FEC Form 3X)	Hee	avoto oslassicis ()		FOR LINE NUMBER: PAGE 37 OF						OF 67				
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(check	, _	—′		_	٦.00						
		Summary Page		21b 28a	22 28b	23		26 29	27 30b					
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or for commercial purposes, other than using the name														
NAME OF COMMITTEE (In Full)		- ·												
CONSERVATIVE MAJORITY FUN	ID													
<u> </u>				-										
Full Name (Last, First, Middle Initial) A. CAPITALONE BANK					Date of Disbursement									
" CAPITALONE DAIN					M M	_	■ D		YYY	Υ				
Mailing Address 1680 CAPITAL ONE DR					02 04 2019									
		T_, _ :												
City MCLEAN	State VA	Zip Code 22102			FEC Identification Number									
Purpose of Disbursement	***	22102			С	C00524	1454							
BÂNK FEE: MERCHANT SERVICE CHARGE			001					: SB21	R 4161					
Candidate Name	ıD.		Category	/				_	ent this	Period				
CONSERVATIVE MAJORITY FUN Office Sought: House Disburser			Type				-		323.5	51				
Office Sought: House Disburser Senate	nent For: Primary	General				7	-	7	020.0					
President	Other (spec				Mar	mo Iter	n							
State: District:					Iviei	no iter	11							
Full Name (Last, First, Middle Initial)		· · · · · · · · · · · · · · · · · · ·												
B. CAPITALONE BANK					Date of	_		ent 						
Mailing Address 1680 CAPITAL ONE DR					M = M 02	/ D	07	/ Y	2019	Y				
			02 07 2019											
,	State		FEC Ide	entificat	ion N	lumber								
MCLEAN Purpose of Disbursement	VA	22102												
BANK FEE: USAePAY			001	$\neg \bot$			-							
Candidate Name			Category					: SB21I sbursem	3.4164 ent this	Period				
CONSERVATIVE MAJORITY FUN	ID		Type	,	ount	J. Luc								
Office Sought: House Disburser						-		7	20.0	00				
Senate President	Primary Other (spec	General			_									
State: District:	Other (spec	оп у <i>)</i>				mo Iter	n							
Full Name (Last, First, Middle Initial)														
C. CAPITALONE BANK					Date of	Disbur	seme	ent						
A. W. A.I.I.					M M	/ D	1 D	/ Y	0040	Υ				
Mailing Address 1680 CAPITAL ONE DR					02	1	19		2019					
City	State	Zip Code			FEC Ide	ontificat	ion A	lumbor						
MCLEAN	VA	22102				ərilincə)	.1011 1\	iuiiib e i						
Purpose of Disbursement BANK FEE: ACCOUNT ANALYSIS			001	7	C	C00524	1454		لــــا					
Candidate Name			001	_ _				: SB21		Doric d				
CONSERVATIVE MAJORITY FUN	ND		Category, Type	′	Arnount	or Eac	in Dis	soursem	ent this	reriod				
	ment For:			\neg					174.	18				
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NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUNI	D											
Full Name (Last, First, Middle Initial) A. CAPITALONE BANK				Date of Disbursement								
Mailing Address 1680 CAPITAL ONE DR				02 20 2019								
MCLEAN	I .	ip Code 22102		FEC Identification Number								
Purpose of Disbursement BANK FEE: USAePAY			001	C C00524454 Transaction ID : SB21B.4165								
CONSERVATIVE MAJORITY FUNI			Category/ Type	Amount of Each Disbursement this Period								
President	nent For: Primary [Other (specify)	General ▼		79.95 Memo Item								
State: District: Full Name (Last, First, Middle Initial)												
B. CAPITALONE BANK				Date of Disbursement								
Mailing Address 1680 CAPITAL ONE DR				02 21 2019								
MCLEAN		ip Code 22102		FEC Identification Number								
Purpose of Disbursement BANK FEE: BOFA COLLECTION FEE		[001	C C00524454 Transaction ID : SB21B.4138								
Candidate Name CONSERVATIVE MAJORITY FUN			Category/ Type	Amount of Each Disbursement this Period								
	nent For: Primary Other (specify)	General		7.95 Memo Item								
Full Name (Last, First, Middle Initial) C. CAPITALONE BANK				Date of Disbursement								
Mailing Address 1680 CAPITAL ONE DR				03 04 2019								
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Purpose of Disbursement BANK FEE: MERCHANT SERVICE CHARGE Candidate Name CONSERVATIVE MAJORITY FUN	ID	[001 Category/ Type	C C00524454 Transaction ID : SB21B.4148 Amount of Each Disbursement this Period								
Office Sought: House Disbursem		General	Туре	247.83								
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В.	CAPITALONE BANK						Date o	f Dis	sbursei	ment						
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	BANK FEE: MERCHANT SERVICE CHARGE			C	001		-	4149								
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B. CAPITALONE BANK				Date of L	/ D D							
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BANK FEE: BOFA DISCOUNT FEE			001			C0052	_	-	321B.	4156			
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	BANK FEE: BOFA DISCOUNT FEE			001		C00524454 Transaction ID : SB21B.4139								
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	BANK FEE: BOFA INTERCHNG FEE			001		_	ınsac	tion I	D : S	B21B.	.4141			
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only								
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NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FU	ND									
Full Name (Last, First, Middle Initial) A. CAPITALONE BANK			Date of Disbursement							
Mailing Address 1680 CAPITAL ONE DR			06 07 2019							
City MCLEAN	State Zip Code VA 22102		FEC Identification Number							
Purpose of Disbursement BANK FEE: USAePAY Candidate Name		001	C C00524454 Transaction ID : SB21B.4169							
CONSERVATIVE MAJORITY FUI	ND ement For:	Category/ Type	Amount of Each Disbursement this Period 20.00							
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B. CAPITALONE BANK			Date of Disbursement							
Mailing Address 1680 CAPITAL ONE DR			06 17 2019							
City MCLEAN Purpose of Disbursement										
BANK FEE: ACCOUNT ANALYSIS Candidate Name		001 Category/	C C00524454 Transaction ID : SB21B.4132 Amount of Each Disbursement this Period							
	ement For:	Type	214.13							
Senate President State: District:	Primary General Other (specify)		Memo Item							
Full Name (Last, First, Middle Initial) C. HINES DIGITAL			Date of Disbursement							
Mailing Address 6 HOLLIBEN CT			01							
City SEVERNA PARK	State Zip Code MD 21146		FEC Identification Number							
Purpose of Disbursement CONSULTING - DIGITAL DEVELOPMENT		003	C C00524454 Transaction ID : SB21B.4186							
Candidate Name CONSERVATIVE MAJORITY FU		Category/ Type	Amount of Each Disbursement this Period							
Office Sought: House Disburse	ement For:		6000.00							
Office Sought: House Disburse Senate President	Primary General Other (specify) ▼		X Memo Item							

SCHEDULE B (FEC Form 3X)			FOR	LINE	NUMBER: PAGE 46 OF						
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	I ` —	k only	′						
		Summary Page	<u> x</u>	21b 28a	22 28b	23 28c	26	27 30b			
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NAME OF COMMITTEE (In Full)											
CONSERVATIVE MAJORITY FUN	D										
Full Name (Last, First, Middle Initial)	_				5.						
A. INFOCISION MANAGEMENT COR	RP				Date of	Disburse					
Mailing Address 320 SPRINGSIDE DR					M M	/ D	24 Y	2019			
City	tate	Zip Code			EEC Id	ontificatio	n Number				
7.11.1077	ОН	44333			FEC IU	entincatio	ii Nullibel				
Purpose of Disbursement PHONE BANK: VOTER CONTACT SERVICES			000	\neg	C	C005244	54				
Candidate Name			003				ID : SB21				
CONSERVATIVE MAJORITY FUN	D		Catego Type	γ/	Amoun	of Each	Disbursem	nent this Period			
Office Sought: House Disbursem			1900					13183.35			
Senate	Primary	General				7	7	45			
President	Other (spec	sify) ▼			Me	mo Item					
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Full Name (Last, First, Middle Initial)	. D				Data	Dishura	mont				
B. INFOCISION MANAGEMENT COF	KP .				Date 0	Disburse		- V- V- V-			
Mailing Address 320 SPRINGSIDE DR					02		19 / Y	2019			
,	State Zip Code					entificatio	n Number				
AKRON Purpose of Disbursement	ОН	44333				0005044	E.4				
PHONE BANK: VOTER CONTACT SERVICES			003			C005244					
Candidate Name			Catego	2//			ID: SB21I	B.4191 nent this Period			
CONSERVATIVE MAJORITY FUN	D		Type	y,	7 4110 411	or Edon	Biobarcon				
Office Sought: House Disbursem								17807.43			
	Primary	General									
President State: District:	Other (spec	шу)			Me	mo Item					
Full Name (Last, First, Middle Initial)											
C. INFOCISION MANAGEMENT COR	RP.				Date of	Disburse	ement				
	••				M M	/ D	D / Y	YYY			
Mailing Address 320 SPRINGSIDE DR					03		8	2019			
City	tate	Zip Code									
	OH	44333			FEC Id	entificatio	n Number				
Purpose of Disbursement				\neg	С	C005244	54				
PHONE BANK: VOTER CONTACT SERVICES			003			nsaction	ID : SB21	B.4192			
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CONSERVATIVE MAJORITY FUN Office Sought: House Disbursem			Туре					7959.48			
	Primary	General									
	Other (spec				Ma	mo Item					
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TOTAL This Period (last page this line number only).				_							

30	CHEDULE B (FEC Form 3X)			FOR	LINE	NUMBER:			PAG	GE 47 (OF 67
Т	EMIZED DISBURSEMENTS		rate schedule(s) category of the		ck only						
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					28a	28b		28c	29	30b	
	ly information copied from such Reports and Statem for commercial purposes, other than using the nam										
\	NAME OF COMMITTEE (In Full)										
/	CONSERVATIVE MAJORITY FUN	D									
٨	Full Name (Last, First, Middle Initial)	. D				Date of	: Diel	hurcor	mont		
٦.	INFOCISION MANAGEMENT COF	KP.				Date of	DISI	Duisei		YYY	
	Mailing Address 320 SPRINGSIDE DR					04		16		2019	
	-	State	Zip Code			FEC Id	entifi	cation	Number		
	AKRON Purpose of Disbursement	ОН	44333								
	PHONE BANK: VOTER CONTACT SERVICES			003		C	_	52445			
	Candidate Name			Catego	m/				ID : SB21 Dishurser	IB.4193 ment this	Period
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	Full Name (Last, First, Middle Initial)										
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	Mailing Address 320 SPRINGSIDE DR					04	_	29)	2019	
	,	State	Zip Code			FEC Id	entifi	cation	Number		
	AKRON Purpose of Disbursement	OH	44333				0001	50445			
	PHONE BANK: VOTER CONTACT SERVICES			003				524454			
	Candidate Name			Catego	rv/				D : SB21 Disburser	B.4194 ment this	Period
	CONSERVATIVE MAJORITY FUN	D		Туре		7 1110 011	. 01 .		310001	TOTAL TIME	1 01100
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		Primary	General								
	President State: District:	Other (speci	iiy)			Me	mo I	tem			
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Э.	INFOCISION MANAGEMENT COR	RP				Date of	Disl	burser	nent		
						M M	/	D I	D / Y	YY	Y
	Mailing Address 320 SPRINGSIDE DR					05	١.	16	<u> </u>	2019	
	City	State	Zip Code			EEO 14	ontifi	antion	Number		
	AKRON	OH	44333			FEC IU	enun	CallOII	Number		
	Purpose of Disbursement PHONE BANK: VOTER CONTACT SERVICES			200		C	C00	52445	4		
	Candidate Name			003					ID : SB21		
	CONSERVATIVE MAJORITY FUN	ID		Catego Type		Amoun	t of E	=ach L	Jisburser	ment this	Period
	Office Sought: House Disbursem			7,50						9891.2	20
		Primary	General								
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S	UBTOTAL of Disbursements This Page (optional)		······		• •					21790.	.32
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s) FOR LINE (check only								
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21h	22 23 26 27 28b 28c 29 30b							
Any information copied from such Reports and Statem or for commercial purposes, other than using the name										
NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUN	· · ·									
Full Name (Last, First, Middle Initial) A. INFOCISION MANAGEMENT COF	RP		Date of Disbursement							
Mailing Address 320 SPRINGSIDE DR			05 30 2019							
AKRON	State Zip Code OH 44333		FEC Identification Number							
Purpose of Disbursement PHONE BANK: VOTER CONTACT SERVICES		003	C C00524454 Transaction ID : SB21B.4196							
Candidate Name CONSERVATIVE MAJORITY FUN		Category/ Type	Amount of Each Disbursement this Period 3316.47							
President	nent For: Primary General Other (specify) ▼		Memo Item							
State: District: Full Name (Last, First, Middle Initial)			ш							
B. INFOCISION MANAGEMENT COF	RP		Date of Disbursement							
Mailing Address 320 SPRINGSIDE DR			06 18 2019							
City AKRON	State Zip Code OH 44333		FEC Identification Number							
Purpose of Disbursement PHONE BANK: VOTER CONTACT SERVICES		003	C C00524454 Transaction ID : SB21B.4197							
Candidate Name CONSERVATIVE MAJORITY FUN		Category/ Type	Amount of Each Disbursement this Period							
Office Sought: House Disbursen Senate	nent For: Primary General		8456.31							
State: President District:	Other (specify)		Memo Item							
Full Name (Last, First, Middle Initial) C. INFOCISION MANAGEMENT COF	 RP		Date of Disbursement							
Mailing Address 320 SPRINGSIDE DR			06 30 / 2019							
City AKRON	State Zip Code OH 44333		FEC Identification Number							
Purpose of Disbursement LN 21b DISBURSEMENTS ALLOCATED TO LN 24	ļ	003	C C00524454 Transaction ID : SB21B.4198							
Candidate Name CONSERVATIVE MAJORITY FUN		Category/ Type	Amount of Each Disbursement this Period							
Office Sought: House Disbursen Senate President State: District:	nent For: Primary General Other (specify) ▼		- 65987.16 Memo Item							
			_ 5/21/ 20							
SUBTOTAL of Disbursements This Page (optional)		<u> </u>	- 54214.38							
TOTAL This Period (last page this line number only)			1							

SCHEDULE B (FEC Form 3X) TEMIZED DISBURSEMENTS	Use sepa	arate schedule(s)				INE NUMBER: PAGE 49 OF only one)							7
TEMIZED DISBURSEMENTS		for each category of the Detailed Summary Page			, <u> </u>					27			
	Detailed	Summary Page			28a	28	b	28c		29	30b		
Any information copied from such Reports and Staten or for commercial purposes, other than using the name													
NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUN	D												
Full Name (Last, First, Middle Initial) A. MACKENZIE & COMPANY Mailing Address 2776 S ARLINGTON MILL DR #80	6					Date 0	М	Disburse			y y y 2019	Y	
City	State	Zip Code				FEC	Iden	tificatio	n Nur	mher			_
ARLINGTON	VA	22206					lacii	imound			-		
Purpose of Disbursement CONSULTING - COMPLIANCE			C		005244 saction	_	3B21E	3.4207					
Candidate Name CONSERVATIVE MAJORITY FUN			Cat	egoi ype	ry/	Amo	unt o	f Each	Disbu	ırseme	ent this		
	Primary	General				Ŀ	_	7	_	7	2500.	00	
State: President State:	Other (spec	cify) 🔻					Mem	o Item					
Full Name (Last, First, Middle Initial) 3. MACKENZIE & COMPANY Mailing Address 2776 S ARLINGTON MILL DR #80	06					M	of D		ement		^y 2019	Y	
ARLINGTON	State VA	Zip Code 22206				FEC	Iden	tificatio	n Nun	nber	_		
Purpose of Disbursement CONSULTING - COMPLIANCE Candidate Name CONSERVATIVE MAJORITY FUND Category/ Type							rans	005244 saction of Each	ID : S		ent this	-	1
	nent For: Primary Other (spec	General Cify)					Mem	o Item	-	7	2500.	00	
Full Name (Last, First, Middle Initial) C. MACKENZIE & COMPANY						Date	_	Disburse			Y	Y	
Mailing Address 2776 S ARLINGTON MILL DR #80	6					0			1	L	2019		
City ARLINGTON	State VA	Zip Code 22206				FEC	Iden	tificatio	n Nun	nber			
Purpose of Disbursement CONSULTING - COMPLIANCE			C	001	\neg	С		005244 saction		SR21F	1200		
Candidate Name CONSERVATIVE MAJORITY FUN	1D		Cat	egoi ype	ry/						ent this	Period	
President	nent For: Primary Other (spec	General Cify) ▼				L. П	Mem	o Item		3	2500.	00	
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SCHEDULE B (FEC Form 3X)						GE 50 OF 6				
ITEMIZED DISBURSEMENTS	Use separate schedule(s) (check on for each category of the		•							
		Summary Page	×	21b 28a	22 28b	23 28c	26	27 30b		
Any information conind from such Departs and Chalen	such Reports and Statements may not be sold or used by any pe									
or for commercial purposes, other than using the name										
NAME OF COMMITTEE (In Full)										
CONSERVATIVE MAJORITY FUN	ID									
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Full Name (Last, First, Middle Initial)		Date of Disbursement								
A. MACKENZIE & COMPANY						/ D		YYYY		
Mailing Address 2776 S ARLINGTON MILL DR #806)1	2019		
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ARLINGTON Purpose of Disbursement	VA	22206				0005044	F.4			
CONSULTING - COMPLIANCE			001			C005244				
Candidate Name			Categor	v/			ID : SB21 Disbursen	B.4210 nent this Period		
CONSERVATIVE MAJORITY FUN	D		Туре	<i>y,</i>						
Office Sought: House Disburser								2500.00		
Senate President	Primary	General			_					
State: District:	Other (spec	ony) ▼			Me	mo Item				
Full Name (Last, First, Middle Initial)										
B. MACKENZIE & COMPANY					Date of	Disburs	ement			
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Mailing Address 2776 S ARLINGTON MILL DR #806						05 01 2019				
City	State	Zip Code								
ARLINGTON	VA	22206			FEC Id	entificatio	n Number			
Purpose of Disbursement CONSULTING - COMPLIANCE			1	\neg	C C00524454					
Candidate Name			001		Tra	nsaction	ID : SB21	B.4211		
CONSERVATIVE MAJORITY FUN	ID		Categor Type	y/	Amount	of Each	Disbursen	nent this Period		
Office Sought: House Disbursen			1,00					2500.00		
Senate	Primary	General				4	4	- 4		
	Other (spec	cify)			Me	mo Item				
State: District:										
Full Name (Last, First, Middle Initial) C. MACKENZIE & COMPANY					Date of	Disburs	ament			
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Mailing Address 2776 S ARLINGTON MILL DR #80	6				06		0	2019		
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City SARLINGTON	State VA	Zip Code 22206			FEC Id	entificatio	n Number			
Purpose of Disbursement	***	22200		_	С	C005244	-54			
CÓNSULTING - COMPLIANCE 001							1D : SB21	B.4212		
Candidate Name Category/								nent this Period		
CONSERVATIVE MAJORITY FUND Type								2500.00		
Office Sought: House Disbursement For: Senate Primary General						7		2000.00		
President	Other (spec				Пм					
State: District:					Me	mo Item				
SUBTOTAL of Disbursements This Page (optional)				•				7500.00		
TOTAL This Period (last page this line number only)				_						

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SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 51				= 51 C	OF 67		
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check		_ ′		_		27	
		Summary Page		21b						
Г	<u> </u>			28a					30b	
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NAME OF COMMITTEE (In Full)										
CONSERVATIVE MAJORITY FUN	D									
Full Name (Last, First, Middle Initial)		5	5							
A. MACKENZIE, SCOTT B, , ,		Date of	_							
Mailing Address 2776 S ARLINGTON MILL DR #806	6				0 <u>1</u>	/ D	07	/ Y	2019	Y
City	State	Zip Code			FEC Ide	entificat	ion Ni	ımher		
ARLINGTON	VA	22206				Jitilloat	011 140	3111001		
Purpose of Disbursement REIMBURSEMENT (AMEX) FOR HINES DIGITAL I	PAYMENT		001	7	C	C00524	454			
Candidate Name				۱ الب				SB21B		
CONSERVATIVE MAJORITY FUN	D		Category, Type	/ ,	Amount	of Eac	n Disi	ourseme	ent this F	'eriod
Office Sought: House Disbursen		I	71						6000.0	0
Senate	Primary	General						7		
	Other (speci	ify) ▼			Me	mo Iten	1			
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Full Name (Last, First, Middle Initial) B.					Date of	Diehur	camai	nt		
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Candidate Name			Category		Amount	of Fac	h Disl	hurseme	ent this F	Period
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Office Sought: House Disbursem								7		
	Primary	General								
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Mailing Address						L		. L		
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Purpose of Disbursement				7	C					
Out did to North										
Candidate Name Category/						of Eac	h Disl	burseme	ent this F	'eriod
Office Sought: House Disbursement For:										
Senate Primary General						-	_	7	1 40	
	Other (speci				Mo	mo Iten	า			
State: District:					IVIE	iio itell	'			
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TOTAL This Period (last page this line number only).									3. 300.	

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 52 OF
FOR LINE NUMBER:
(check only one)

	9
X	10

67

NAME OF COMMITTEE (In Full)

CONSERVATIVE MAJORITY FUND

A. Full Name (Last, First, Middle Initial) of Debt INFOCISION MANAGEMENT Mailing Address 320 SPRINGSIDE DR	Nature of Debt (Purpose): PHONE BANK: TELEMARKETING SERVICES		
320 SPRINGSIDE DR			
City AKRON			
Outstanding Balance Beginning This Period 2958.24			Transaction ID : SD10.4189
Amount Incurred This Period	Pa	yment This Period	Outstanding Balance at Close of This Period
100000.00		72513.36	30444.88
B. Full Name (Last, First, Middle Initial) of Debto	r or Creditor		Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	
Amount Incurred This Period	7	yment This Period	Outstanding Balance at Close of This Period
C. Full Name (Last, First, Middle Initial) of Debt Mailing Address	or or Creditor		Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	
Outstanding Balance Beginning This Period Amount Incurred This Period	Pa	yment This Period	Outstanding Balance at Close of This Period
	4	7 7	
SUBTOTALS This Period This Page (optional)			30444.88
TOTALS This Period (last page this line number	r only)	>	30444.88
TOTAL OUTSTANDING LOANS from Schedule	0.00		
ADD 2) and 3) and carry forward to appropriate	e line of Summa	ary Page (last page only) ▶	30444.88

FEMIZED INDEPENDENT EXPENDITURES	•			PAGE 53 OF 67 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
CONSERVATIVE MAJORITY FUND				C C00524454
				G 000024104
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed o	on M = M / D = D / Y = Y = Y
Full Name of Payee		X Memo	Item	Date of Public Distribution/Dissemination
ANCHOR COMPUTER				02 11 2019
Mailing Address 1900 NEW HIGHWAY				02 11 2515
				Amount
City	State	Zip Code		729.18
FARMINGDALE	NY	11735		Transaction ID : SE.4220
Purpose of Expenditure		Category/	_	Date of Disbursement or Obligation
NCOA FILES		Type 004		02 13 2019
Name of Federal Candidate:		✗ Support	Office	Sought: House District:00
TRUMP, DONALD J, , ,		Oppose	×	President Senate State:
Calendar Year-To-Date			Disbur	sement For: Primary 🕱 General
Per Election for Office Sought	7-1-1-7-	13706.94	2020	Other (specify) ▶
Full Name of Payee		∡ Memo	Item	Date of Public Distribution/Dissemination
HINES DIGITAL				M M / D D / Y Y Y Y
Mailing Address				02 11 2019
6 HOLLIBEN CT				Amount
City	State	Zip Code		15000.00
SEVERNA PARK	MD	21146		Transaction ID : SE.4115
Purpose of Expenditure		Catanani	_	Date of Disbursement or Obligation
VOTER CONTACT eMAILS OVER SEVERAL WE	EEKS	Category/ Type 004		02 / 11 / 2019
Name of Federal Candidate:		✗ Support	Office	Sought: House District: 00
TRUMP, DONALD J, , ,		Oppose	X	President Senate State:
Calendar Year-To-Date		44000.05		sement For: Primary X General
Per Election for Office Sought	7 7	11996.85	2020	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	3		. •	0.00
(b) SUBTOTAL of Unitemized Independent Expenditu	ıres		. •	
(c) TOTAL Independent Expenditures			. ▶	
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid party committee) any political party committee or its	ate or authorized			
MACKENZIE, SCOTT B, , ,	[Electronically Fi	led1 ~ .	M =	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		Date	e 07	29 2019

PAGE 54 OF 67 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ CONSERVATIVE MAJORITY FUND C00524454 Check if 24-hour report 48-hour report Amends report filed on New report Date of Public Distribution/Dissemination Full Name of Payee X Memo Item HINES DIGITAL 02 11 2019 Mailing Address 6 HOLLIBEN CT Amount Zip Code -15000.00City State 21146 Transaction ID: SE.8534 SEVERNA PARK MD Date of Disbursement or Obligation Purpose of Expenditure Category/ PROGRAM CANCELLED PRIOR TO IMPLEMENTATION 004 02 11 2019 Type Name of Federal Candidate: 00 **X** Support Office Sought: House District: TRUMP, DONALD J,,,, Oppose **x** President Senate State: Disbursement For: Primary **X** General Calendar Year-To-Date 11996.85 2020 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination ✗ Memo Item INFOCISION MANAGEMENT CORP 2019 02 11 Mailing Address 320 SPRINGSIDE DR Amount City State Zip Code 11996.85 **AKRON** Transaction ID: SE.4113 ОН 44333 Date of Disbursement or Obligation Purpose of Expenditure Category/ VOTER CONTACT CALLS OVER SEVERAL WEEKS 004 24 2019 01 Type Name of Federal Candidate: 00 **✗** Support Office Sought: House District: TRUMP, DONALD J, , , Oppose **X** President Senate State: **X** General Disbursement For: Primary Calendar Year-To-Date 0.00 2020 Per Election for Office Sought Other (specify) ▶ 0.00 (a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures 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. MACKENZIE, SCOTT B, , , [Electronically Filed] 07 29 2019 Date Signature

PAGE 55 OF 67 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ CONSERVATIVE MAJORITY FUND C00524454 Check if 24-hour report 48-hour report Amends report filed on New report Date of Public Distribution/Dissemination Full Name of Payee INFOCISION MANAGEMENT CORP 02 11 2019 Mailing Address 320 SPRINGSIDE DR Amount Zip Code 11996.85 City State ОН 44333 Transaction ID: SE.4199 **AKRON** Date of Disbursement or Obligation Purpose of Expenditure Category/ PHONE BANK: VOTER CONTACT CALLS OVER SEVERAL 004 01 24 2019 Type WFFKS Name of Federal Candidate: 00 **X** Support Office Sought: House District: TRUMP, DONALD J, , , Oppose **x** President Senate State: Disbursement For: Primary **X** General Calendar Year-To-Date 11996.85 2020 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination ✗ Memo Item INFOCISION MANAGEMENT CORP 2019 02 11 Mailing Address 320 SPRINGSIDE DR Amount City State Zip Code 29799.58 **AKRON** Transaction ID: SE.4255 OH 44333 Date of Disbursement or Obligation Purpose of Expenditure Category/ VOTER CONTACT CALLS - BUDGETED NOT DISBURSED 004 2019 02 11 Type Name of Federal Candidate: x Support 00 Office Sought: House District: TRUMP, DONALD J, , , Oppose **X** President Senate State: **X** General Disbursement For: Primary Calendar Year-To-Date 11996.85 2020 Per Election for Office Sought Other (specify) ▶ 11996.85 (a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures 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. MACKENZIE, SCOTT B, , , [Electronically Filed] 07 29 2019 Date Signature

TEMIZED INDEPENDENT EXPENDITURES			PAGE 56 OF 67 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
CONSERVATIVE MAJORITY FUND			C C00524454
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on
Full Name of Payee INFOCISION MANAGEMENT CORP		☐ Memo	Item Date of Public Distribution/Dissemination
Mailing Address 320 SPRINGSIDE DR			02 11 2019 Amount
City	State	Zip Code	16204.76
AKRON	ОН	44333	Transaction ID : SE.4200 Date of Disbursement or Obligation
Purpose of Expenditure PHONE BANK: VOTER CONTACT CALLS OVER S WEEKS	SEVERAL	Category/ Type 004	M - M / D - D / Y - Y - Y
Name of Federal Candidate:		✗ Support	Office Sought: House District: 00
TRUMP, DONALD J, , ,		Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	7 1 7	30943.05	Disbursement For: ☐ Primary X General 2020 ☐ Other (specify) ▶
Full Name of Payee		✗ Memo	
INFOCISION MANAGEMENT CORP			02 11 2019
Mailing Address 320 SPRINGSIDE DR			Amount
City	State	Zip Code	16204.76
AKRON	ОН	44333	Transaction ID : SE.4231 Date of Disbursement or Obligation
Purpose of Expenditure VOTER CONTACT CALLS OVER SEVERAL WEE	:KS	Category/ Type 004	M M / D D / Y Y Y
Name of Federal Candidate:		✗ Support	Office Sought: House District: 00
TRUMP, DONALD J, , ,		Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	7 7	30943.05	Disbursement For: ☐ Primary
(a) SUBTOTAL of Itemized Independent Expenditures			
(b) SUBTOTAL of Unitemized Independent Expenditure	res		•
(c) TOTAL Independent Expenditures			•
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized		
MACKENZIE, SCOTT B, , ,	Electronically File	<i>led]</i> Date	9 07 29 2019
Signature			

TEMIZED INDEPENDENT EXPENDITURES	i			PAGE 57 OF 67 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
CONSERVATIVE MAJORITY FUND				C C00524454
Check if 24-hour report 48-hour report	New repo	ort Amends repo		/ M / D D / Y Y Y Y
Full Name of Payee INFOCISION MANAGEMENT CORP		☐ Memo		of Public Distribution/Dissemination
Mailing Address 320 SPRINGSIDE DR			Amou	02 11 2019 unt
City	State	Zip Code	— F	7243.13
AKRON	ОН	44333		saction ID : SE.4201
Purpose of Expenditure PHONE BANK: VOTER CONTACT CALLS OVER WEEKS	SEVERAL	Category/ Type 004		of Disbursement or Obligation M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		X Support	Office Sough	ht: House District:00
TRUMP, DONALD J, , ,		Oppose	x Presid	dent Senate State:
Calendar Year-To-Date Per Election for Office Sought	7 7	38485.18	Disbursemer 2020	nt For:
Full Name of Payee		X Memo	Item Date	of Public Distribution/Dissemination
INFOCISION MANAGEMENT CORF)			02 11 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 320 SPRINGSIDE DR			Amou	int
			Amou	
City AKRON	State	Zip Code	Tran	7243.13 saction ID : SE.4232
Purpose of Expenditure	OH	44333	Date	of Disbursement or Obligation
VOTER CONTACT CALLS OVER SEVERAL WE	EKS	Category/ Type 004		03 / 18 / 2019
Name of Federal Candidate:		x Support	Office Sough	ht: House District:00
TRUMP, DONALD J, , ,		Oppose	X Presid	dent Senate State:
Calendar Year-To-Date Per Election for Office Sought		38485.18	Disbursemen 2020	nt For:
(a) SUBTOTAL of Itemized Independent Expenditures	s		· [7243.13
(b) SUBTOTAL of Unitemized Independent Expenditu	ıres		· [
(c) TOTAL Independent Expenditures			•	7
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid party committee) any political party committee or its	ate or authorized	•		· · · · · · · · · · · · · · · · · · ·
	[Electronically Fil	<i>led]</i> Date	e 07	29 / 2019
Signature				

TEMIZED INDEPENDENT EXPENDITURES				PAGE 58 OF 67
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
CONSERVATIVE MAJORITY FUND				FEC IDENTIFICATION NUMBER ▼ C C00524454
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M = M / D = D / Y = Y = Y
Full Name of Payee INFOCISION MANAGEMENT CORP		☐ Memo	Item Date	of Public Distribution/Dissemination
INFOCISION MANAGEMENT CORP				02
Mailing Address 320 SPRINGSIDE DR			Amo	unt
City	Otata	Zin Codo		7660.06
City	State	Zip Code 44333	Tran	7668.86 saction ID : SE.4202
AKRON	ОП	44333		of Disbursement or Obligation
Purpose of Expenditure PHONE BANK: VOTER CONTACT CALLS OVER S WEEKS	SEVERAL	Category/ Type 004	4	04 / 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		X Support	Office Soug	ht: House District: 00
TRUMP, DONALD J, , ,		Oppose	X Presi	dent Senate State:
Calendar Year-To-Date			Disburseme	ent For: Primary Seneral
Per Election for Office Sought	7	46154.04	2020	Other (specify) ▶
Full Name of Payee		∡ Memo	Item Date	of Public Distribution/Dissemination
INFOCISION MANAGEMENT CORP)			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 320 SPRINGSIDE DR			_ '	02 11 2010
320 OF KINGGIDE DIK			Amo	unt
City	State	Zip Code		7668.86
AKRON	ОН	44333		nsaction ID : SE.4234 of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
VOTER CONTACT CALLS OVER SEVERAL WEE	<u>-KS</u>	Type 004		04 16 2019
Name of Federal Candidate:		x Support	Office Soug	ht: House District: 00
TRUMP, DONALD J, , ,		Oppose	X Presi	dent Senate State:
Calendar Year-To-Date		46154.04	Disburseme	ent For: Primary 🗶 General
Per Election for Office Sought	7 7	40104.04	2020	Other (specify) ▶
			_	
(a) SUBTOTAL of Itemized Independent Expenditures	3		· •	7668.86
(b) SUBTOTAL of Unitemized Independent Expenditu	res		• •	
(c) TOTAL Independent Expenditures				
(c) 10 1/2 maspendont Exponditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candidates the control of	ate or authorized	•		· · · · · · · · · · · · · · · · · · ·
party committee) any political party committee or its	agent.			
MACKENZIE, SCOTT B, , ,	[Electronically Fil	lod1	M = M /	D D / Y Y Y Y Y
Signature	Electronically Fit	Date	e 07	29 2019

TEMIZED INDEPENDENT EXPENDITURES				PAGE 59 OF 67
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
CONSERVATIVE MAJORITY FUND				FEC IDENTIFICATION NUMBER ▼ C C00524454
				C 00027404
Check if 24-hour report 48-hour report	New repo	ort Amends repo		/ D D / Y Y Y Y Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
INFOCISION MANAGEMENT CORP				02 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 320 SPRINGSIDE DR			Amou	ınt
City	State	Zip Code		3159.34
AKRON	ОН	44333		saction ID : SE.4203 of Disbursement or Obligation
Purpose of Expenditure PHONE BANK: VOTER CONTACT CALLS OVER S WEEKS	SEVERAL	Category/ Type 004		04 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		X Support	Office Sough	ht: House District:00
TRUMP, DONALD J, , ,		Oppose	✗ Presid	
Calendar Year-To-Date		10010.00	Disburseme	nt For: Primary Seneral
Per Election for Office Sought		49313.38	2020	Other (specify)
Full Name of Payee		★ Memo	Item Date	of Public Distribution/Dissemination
INFOCISION MANAGEMENT CORP				02 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 320 SPRINGSIDE DR			Amou	
			Amou	int
City	State	Zip Code		3159.34
AKRON	OH	44333	I	saction ID : SE.4235 of Disbursement or Obligation
Purpose of Expenditure PHONE BANK: VOTER CONTACT CALLS OVER WEEKS	SEVERAL	Category/ Type 004		04 / 29 / 2019
Name of Federal Candidate:		✗ Support	Office Sough	ht: House District:00
TRUMP, DONALD J, , ,		Oppose	X Presid	lent Senate State:
Calendar Year-To-Date		49313.38	Disburseme	nt For: Primary 🗶 General
Per Election for Office Sought	7 7	43313.30	2020	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	í		· -	3159.34
(b) SUBTOTAL of Unitemized Independent Expenditure	res		· •	
(c) TOTAL Independent Expenditures			· •	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•		· ·
MACKENZIE, SCOTT B, , ,	[Electronically Fil	led1 _	M M /	
Signature	Electronically I ii	Date	e 07	29 2019

TEMIZED INDEPENDENT EXPENDITURES				PAGE 60 OF 67
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
CONSERVATIVE MAJORITY FUND				FEC IDENTIFICATION NUMBER ▼ C C00524454
				O stazio
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M = M / D = D / Y = Y = Y
Full Name of Payee INFOCISION MANAGEMENT CORP		☐ Memo	Item Date	e of Public Distribution/Dissemination
INFOCISION MANAGEMENT CORP				02 11 2019
Mailing Address 320 SPRINGSIDE DR				<u>.</u>
			Amo	ount
City	State	Zip Code		9000.99
AKRON	OH	44333		nsaction ID : SE.4204 e of Disbursement or Obligation
Purpose of Expenditure PHONE BANK: VOTER CONTACT CALLS OVER S WEEKS	SEVERAL	Category/ Type 004	4	M M / D D / Y Y Y Y Y Y Y 16 2019
Name of Federal Candidate:		✗ Support	Office Sou	ght: House District:00
TRUMP, DONALD J, , ,		Oppose	X Pres	ident Senate State:
Calendar Year-To-Date		1-3-3-3	Disburseme	ent For: Primary X General
Per Election for Office Sought	7	58314.37	2020	Other (specify) ▶
Full Name of Payee		∡ Memo	Item Date	e of Public Distribution/Dissemination
INFOCISION MANAGEMENT CORP	,			02 / 11 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 320 SPRINGSIDE DR				
			Amo	punt
City	State	Zip Code		9000.99
AKRON	ОН	44333		nsaction ID : SE.4237 e of Disbursement or Obligation
Purpose of Expenditure PHONE BANK: VOTER CONTACT CALLS OVER WEEKS	SEVERAL	Category/ Type 004		05 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		✗ Support	Office Sou	ght: House District: 00
TRUMP, DONALD J, , ,		Oppose	X Pres	ident Senate State:
Calendar Year-To-Date		E0244.27	Disburseme	ent For: Primary X General
Per Election for Office Sought	7 7	58314.37	2020	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	· · · · · · · · · · · · · · · · · · ·		· -	9000.99
(b) SUBTOTAL of Unitemized Independent Expenditu	res		• [
(c) TOTAL Independent Expenditures			• [
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized	•		·
MACKENZIE, SCOTT B, , ,	[Electronically Fil	led1	M M	/ D D / Y Y Y Y
Signature		Date	e 07	29 2019

TEMIZED INDEPENDENT EXPENDITURES				PAGE 61 OF 67 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
CONSERVATIVE MAJORITY FUND				C C00524454
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M
Full Name of Payee INFOCISION MANAGEMENT CORP		☐ Memo	item = site	of Public Distribution/Dissemination
Mailing Address 320 SPRINGSIDE DR			— L	02 / 11 / 2019
320 SPRINGSIDE DR			Amou	int
City	State	Zip Code		3017.99
AKRON	ОН	44333		saction ID : SE.4205 of Disbursement or Obligation
Purpose of Expenditure PHONE BANK: VOTER CONTACT CALLS OVER S WEEKS	SEVERAL	Category/ Type 004		05 30 7 2019
Name of Federal Candidate:		X Support	Office Soug	ht: House District: 00
TRUMP, DONALD J, , ,		Oppose	X Presid	lent Senate State:
Calendar Year-To-Date Per Election for Office Sought	7 7	61332.36	Disbursement 2020	nt For: Primary
Full Name of Payee		X Memo	Item Date	of Public Distribution/Dissemination
INFOCISION MANAGEMENT CORP	1			02 11 2019
Mailing Address 320 SPRINGSIDE DR			Amou	
			Amoc	
City	State	Zip Code	Tron	3017.99
AKRON	ОН	44333		saction ID : SE.4238 of Disbursement or Obligation
Purpose of Expenditure PHONE BANK: VOTER CONTACT CALLS OVER WEEKS	SEVERAL	Category/ Type 004		05 30 7 2019
Name of Federal Candidate:		x Support	Office Soug	ht: House District: 00
TRUMP, DONALD J, , ,		Oppose	X Presid	lent Senate State:
Calendar Year-To-Date Per Election for Office Sought		61332.36	Disbursemen	nt For: Primary X General
Tot Elocion for Office Cought	1			Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	·			3017.99
(b) SUBTOTAL of Unitemized Independent Expenditu	res		• •	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independed with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized			
MACKENZIE, SCOTT B, , ,	[Electronically Fil	ed]	M M /	20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		Date	9 07	29 2019

TEMIZED INDEPENDENT EXPENDITURES				PAGE 62 OF 67
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
CONSERVATIVE MAJORITY FUND				FEC IDENTIFICATION NUMBER ▼ C C00524454
				O
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M / D D / Y Y Y Y
Full Name of Payee INFOCISION MANAGEMENT CORP		☐ Memo	Item Date	of Public Distribution/Dissemination
IN OCISION WANAGEWENT CORF				02
Mailing Address 320 SPRINGSIDE DR			Amou	nt
City	State	Zip Code	$ \Gamma$	7695.24
AKRON	ОН	44333		saction ID : SE.4206
Purpose of Expenditure PHONE BANK: VOTER CONTACT CALLS OVER S WEEKS	SEVERAL	Category/ Type 004	— I	of Disbursement or Obligation 06 18 2019
Name of Federal Candidate:		X Support	Office Sough	nt: House District: 00
TRUMP, DONALD J, , ,		Oppose	X Presid	
Calendar Year-To-Date			Disburseme	nt For: Primary X General
Per Election for Office Sought	7 7	70200.42	2020	Other (specify)
Full Name of Payee		∡ Memo	Item Date	of Public Distribution/Dissemination
INFOCISION MANAGEMENT CORP				02 11 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 320 SPRINGSIDE DR				
			Amou	nt
City	State	Zip Code		7695.24
AKRON	ОН	44333		saction ID : SE.4239 of Disbursement or Obligation
Purpose of Expenditure PHONE BANK: VOTER CONTACT CALLS OVER WEEKS	SEVERAL	Category/ Type 004		06 18 2019
Name of Federal Candidate:		✗ Support	Office Sough	nt: House District:00
TRUMP, DONALD J, , ,		Oppose	X Presid	ent Senate State:
Calendar Year-To-Date		70200.42	Disburseme	nt For: Primary 🗶 General
Per Election for Office Sought	T-1-T-	70200.42	2020	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	·		•	7695.24
(b) SUBTOTAL of Unitemized Independent Expenditure	res		•	
(c) TOTAL Independent Expenditures			· •	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•		•
MACKENZIE, SCOTT B, , ,	[Electronically Fil	led1	M = M /	D D / Y Y Y Y
Signature		Date	e 07	29 2019

TEMIZED INDEPENDENT EXPENDITURES				PAGE 63 OF 67
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
CONSERVATIVE MAJORITY FUND				FEC IDENTIFICATION NUMBER ▼ C. C00524454
				C C00524454
Check if 24-hour report 48-hour report	New repo	ort Amends repo		= M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
PARAMOUNT COMMUNICATION				02 11 2019
Mailing Address 525-K EAST MARKET ST			Amou	nt
SUITE 114		,	Alliou	
City	State	Zip Code		1172.82
LEESBURG	VA	20176		saction ID : SE.4213 of Disbursement or Obligation
Purpose of Expenditure VOTER CONTACT eMAILS OVER SEVERAL WEE	KS	Category/ Type 004		06 10 2019
Name of Federal Candidate:		✗ Support	Office Sough	nt: House District: 00
TRUMP, DONALD J, , ,		Oppose	x Presid	
Calendar Year-To-Date			Disbursemer	nt For: Primary K General
Per Election for Office Sought	7	62505.18	2020	Other (specify) ▶
Full Name of Payee		∡ Memo	Item Date	of Public Distribution/Dissemination
PARAMOUNT COMMUNICATION			[02 11 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 525-K EAST MARKET ST				
SUITE 114			Amou	nt
City	State	Zip Code		1172.82
LEESBURG	VA	20176		saction ID : SE.4253 of Disbursement or Obligation
Purpose of Expenditure VOTER CONTACT eMAILS OVER SEVERAL WEI	EKS	Category/		M M / D D / Y Y Y Y
VOTER CONTACT GWAILS OVER SEVERAL WEI	LICO	Type 004		06 10 2019
Name of Federal Candidate:		x Support	Office Sough	nt: District: 00
TRUMP, DONALD J, , ,		Oppose	X Presid	ent Senate State:
Calendar Year-To-Date		62505.18	Disbursemer	nt For: Primary 🗶 General
Per Election for Office Sought	7	02303.10	²⁰²⁰	Other (specify)
			_	
(a) SUBTOTAL of Itemized Independent Expenditures			· •	1172.82
(I) OUDTOTAL of United in a distance of the decrease of the second in th				
(b) SUBTOTAL of Unitemized Independent Expenditur	'es		•	
(c) TOTAL Independent Expenditures				
				7 7 7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•		•
MACKENZIE, SCOTT B, , ,	Electronically Fil	led1 _	M = M /	D D / Y Y Y Y
Signature	Electronically File	Date	e 07	29 2019

				FOR LINE 24 OF FORM 3X	
NAME OF COMMITTEE (In Full)					
CONSERVATIVE MAJORITY FUND					
				C C00524454	
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M / D D / Y Y Y Y	
Full Name of Payee STRATEGIC CAMPAIGN GROUP		☐ Memo	Item Dat	e of Public Distribution/Dissemination	
Mailing Address 191 MAIN STREET				02 11 2019	
SUITE 310			Am	ount	
City				729.18	
ANNAPOLIS	MD	21401		insaction ID : SE.4217 e of Disbursement or Obligation	
Purpose of Expenditure REIMBURSEMNT: ANCHOR COMPUTER - NCOA				02 / 02 / 2019	
Name of Federal Candidate:		X Support	Office Sou	ught: House District:00	
TRUMP, DONALD J, , ,		Oppose	x Pres		
Calendar Year-To-Date Per Election for Office Sought	<u></u>	12726.03	Disbursem	nent For:	
Full Name of Payee		☐ Memo	Item Dat	e of Public Distribution/Dissemination	
STRATEGIĆ CAMPAIGN GROUP				M M / D D / Y Y Y	
Mailing Address 191 MAIN STREET				02 11 2019	
SUITE 310			Am	ount	
City	State	Zip Code		980.91	
ANNAPOLIS	MD	21401		ansaction ID : SE.4219 e of Disbursement or Obligation	
Purpose of Expenditure REIMBURSEMENT: XVERIFY - eMAIL VERIFICAT	ΓΙΟΝ	Category/ Type 004		02 / 13 / 2019	
Name of Federal Candidate:		✗ Support	Office Sou	ught: House District: 00	
TRUMP, DONALD J, , ,		Oppose		sident Senate State:	
Calendar Year-To-Date Per Election for Office Sought	7 7	13706.94	Disbursem 2020	nent For: Primary	
(a) SUBTOTAL of Itemized Independent Expenditures				1710.09	
(a) 002 10 112 01 110 112 01 110 112 01 110 110					
(b) SUBTOTAL of Unitemized Independent Expenditure	es		•		
(c) TOTAL Independent Expenditures			•		
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized				
MACKENZIE, SCOTT B, , ,	Electronically Fil	ed]	M = M	/ D D / Y Y Y Y Y Y Y 2010	
Signature		_ Date	9 07	29 2019	

TEMIZED INDEPENDENT EXPENDITURES				PAGE 65 OF 67
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼
CONSERVATIVE MAJORITY FUND				C C00524454
				M = M / D = D / Y = Y = Y
Check if 24-hour report 48-hour report	New repo	ort Amends repo		
Full Name of Payee STRATEGIC CAMPAIGN GROUP		☐ Memo		of Public Distribution/Dissemination
Mailing Address 191 MAIN STREET			Amou	02 11 2019
SUITE 310			Allie	
City	State	Zip Code	L	1031.35
ANNAPOLIS	MD	21401		saction ID : SE.4222 of Disbursement or Obligation
Purpose of Expenditure DOMAIN REGISTRATION & WEBSITE UPDATES		Category/ Type 004		02 13 7 2019
Name of Federal Candidate:		✗ Support	Office Soug	ht: House District: 00
TRUMP, DONALD J, , ,		Oppose	✗ Presid	
Calendar Year-To-Date Per Election for Office Sought	7	14738.29	Disburseme	
	7		1	Other (specify)
STRATEGIC CAMPAIGN GROUP		X Memo		of Public Distribution/Dissemination
Mailing Address 191 MAIN STREET				02 11 2010
SUITE 310			Amou	unt
City	State	Zip Code		1031.35
ANNAPOLIS	MD	21401		nsaction ID : SE.4240 of Disbursement or Obligation
Purpose of Expenditure DOMAIN REGISTRATION & WEBSITE UPDATES		Category/ Type 004		02 / 13 / 2019
Name of Federal Candidate:		Support	Office Soug	ht: House District: 00
TRUMP, DONALD J, , ,		Oppose	X Presid	
Calendar Year-To-Date Per Election for Office Sought		14738.29	Disburseme	
	7			Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures				1031.35
(b) SUBTOTAL of Unitemized Independent Expenditure	es		· •	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidat party committee) any political party committee or its	te or authorized	•		•
	Electronically File	[ed] Date	e 07	29 / 2019
Signature				

TEMIZED INDEPENDENT EXPENDITURES	>			PAGE 66 OF 67
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼
CONSERVATIVE MAJORITY FUND				C C00524454
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M / D D / Y Y Y Y
Full Name of Payee UPT STRATEGIES		☐ Memo	M	of Public Distribution/Dissemination
Mailing Address PO BOX 31403			Amour	02 11 2019 nt
City	State	Zip Code	$-\Box$	299.00
CHARLESTON	SC	29417		raction ID : SE.4224 of Disbursement or Obligation
Purpose of Expenditure WEBSITE HOSTING		Category/ Type 004		03 / 12 / 2019
Name of Federal Candidate:		X Support	Office Sough	nt: House District: 00
TRUMP, DONALD J, , ,		Oppose	x Preside	ent Senate State:
Calendar Year-To-Date Per Election for Office Sought		31242.05	Disbursemen 2020 O	ther (specify) ▶
Full Name of Payee UPT STRATEGIES		✗ Memo	Item Date of	of Public Distribution/Dissemination
				02 / 11 / 2019
Mailing Address PO BOX 31403			Amour	nt
City	State	Zip Code	$ \Gamma$	299.00
CHARLESTON	sc	29417		saction ID : SE.4241 of Disbursement or Obligation
Purpose of Expenditure WEBSITE HOSTING		Category/ Type 004	М	03 / 12 / 2019
Name of Federal Candidate:		✗ Support	Office Sough	nt: House District: 00
TRUMP, DONALD J, , ,		Oppose	✗ Preside	ent Senate State:
Calendar Year-To-Date Per Election for Office Sought	<u> </u>	31242.05	Disbursemen 2020 O	nt For: ☐ Primary X General other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditure	s		.	299.00
(b) SUBTOTAL of Unitemized Independent Expendit	ures		.	7
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid party committee) any political party committee or its	date or authorized			
MACKENZIE, SCOTT B, , ,	[Electronically Fil	<i>led]</i> Date	07	29 / 2019
Signature				

TEMIZED INDEPENDENT EXPENDITURES	3			PAGE 67 OF 67 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
CONSERVATIVE MAJORITY FUND				
				C C00524454
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		X Memo	Item Date	e of Public Distribution/Dissemination
XVERIFY INC				02 / 11 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 350 N ORLEANS ST			Amo	ount
SUITE 9000N				
City	State	Zip Code	I L	980.91
CHICAGO	IL	60654		nsaction ID : SE.4221 e of Disbursement or Obligation
Purpose of Expenditure eMAIL VERIFICATION		Category/ Type 004	4	02 13 / 2019
Name of Federal Candidate:		X Support	Office Sou	ght: House District:00
TRUMP, DONALD J, , ,		Oppose	x Pres	ident Senate State:
Calendar Year-To-Date Per Election for Office Sought		13706.94	Disburseme	ent For: Primary X General
Tot Election for Child Cought	7			Other (specify) ▶
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
				M M / D D / Y Y Y Y
Mailing Address			Λ	
			Amo	ount.
City	State	Zip Code		
			Date	e of Disbursement or Obligation
Purpose of Expenditure Category/				M M / D D / Y Y Y Y
		Type		
Name of Federal Candidate:		Support	Office Sou	ght: House District:
		Oppose	Pres	ident Senate State:
Calendar Year-To-Date			Disbursem	ent For: Primary General
Per Election for Office Sought	7-1-1-7-			Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditure	S			0.00
(b) SUBTOTAL of Unitemized Independent Expenditu	ures		•	
(c) TOTAL Independent Expenditures			· •	70200.42
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candic party committee) any political party committee or its	late or authorized			
MACKENZIE, SCOTT B, , ,	m	,	M = M	/ D D / Y Y Y Y Y
Signature	[Electronically Fil	Date Date	e 07	29 2019