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

NAME OF COMMITTEE (In Full)
Senate Conservatives Fund

FEC IDENTIFICATION NUMBER ▼
C C00448696

Check if [X] 24-hour report [ ] 48-hour report [X] New report [ ] Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Senate Conservatives Fund

Mailing Address PO Box 388

City: Alexandria | State: VA | Zip Code: 22313-0388

Purpose of Expenditure
IE-Sasse-Online Processing

Category/ Type

Date of Public Distribution/Dissemination: 10 / 11 / 2014

Amount: 602.15

Transaction ID : E8714D0B6C317476ABE4

Date of Disbursement or Obligation: 10 / 11 / 2014

Name of Federal Candidate
Benjamin E Sasse

[X] Support [ ] Oppose

Office Sought: [ ] House District: ____ [ ] President [X] Senate State: NE

Calendar Year-To-Date Per Election for Office Sought: 80203.60

Disbursement For: [ ] Primary [ ] General 2014 [X] Other (specify) ▶ General 2014

Full Name of Payee
Senate Conservatives Fund

Mailing Address PO Box 388

City: Alexandria | State: VA | Zip Code: 22313-0388

Purpose of Expenditure
IE-Sasse-Online Processing

Category/ Type

Date of Public Distribution/Dissemination: 10 / 15 / 2014

Amount: 411.55

Transaction ID : E3E5B436F57304C9A9F2

Date of Disbursement or Obligation: 10 / 15 / 2014

Name of Federal Candidate
Benjamin E Sasse

[X] Support [ ] Oppose

Office Sought: [ ] House District: ____ [ ] President [X] Senate State: NE

Calendar Year-To-Date Per Election for Office Sought: 80615.15

Disbursement For: [ ] Primary [ ] General 2014 [X] Other (specify) ▶ General 2014

(a) SUBTOTAL of Itemized Independent Expenditures ▶ 1013.70

(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.

Paul Kilgore ***[Electronically Filed]*** Date 10 / 18 / 2014

Signature

Image# 14950886587

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

NAME OF COMMITTEE (In Full)
Senate Conservatives Fund

FEC IDENTIFICATION NUMBER ▼
C C00448696

Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on M M / D D / Y Y Y Y

Full Name of Payee
Conservative Connector LLC

Mailing Address 435 East Main St. Ste. 250

City: Greenwood | State: IN | Zip Code: 46143-1464

Purpose of Expenditure
IE-Sasse-Email List Rental

Category/ Type

Date of Public Distribution/Dissemination
10 / 18 / 2014

Amount
12694.45

Transaction ID : E7C16CB1249B34D57931

Date of Disbursement or Obligation
10 / 18 / 2014

Name of Federal Candidate
Benjamin E Sasse

☒ Support ☐ Oppose

Office Sought: ☐ House ☐ President ☒ Senate District: ____ State: NE

Calendar Year-To-Date Per Election for Office Sought
93309.60

Disbursement For: ☐ Primary ☐ General 2014 ☒ Other (specify) ▶ General 2014

Full Name of Payee

Mailing Address

City | State | Zip Code

Purpose of Expenditure

Category/ Type

Date of Public Distribution/Dissemination

Amount

Date of Disbursement or Obligation

Name of Federal Candidate

☐ Support ☐ Oppose

Office Sought: ☐ House ☐ President ☐ Senate District: ____ State: ____

Calendar Year-To-Date Per Election for Office Sought

Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶ ____

(a) SUBTOTAL of Itemized Independent Expenditures ▶ 12694.45

(b) SUBTOTAL of Unitemized Independent Expenditures ▶

(c) TOTAL Independent Expenditures ▶ 13708.15

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Paul Kilgore ***[Electronically Filed]*** Date 10 / 18 / 2014

Signature