PAGE 1 / 20

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

TOKW 5X	For Other Than An Aut	norized Committee	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
CONSERVATIVE LIE	BERTY COALITION		
ADDRESS (number and street)	1624 MARKET STREET		
V	SUITE 202		
Check if different than previously reported. (ACC)	DENVER		CO 80202
2. FEC IDENTIFICATION N	NUMBER ▼ CIT	TY▲	STATE ▲ ZIP CODE ▲
C C00575118		S THIS NEW (N) OI	AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report Due On:	o 20 (M2) May 20 (Mr 20 (M3) Jun 20 (M	(Non-Election Year Only)
(a) Quarterly Reports:			(Non-Election Year Only)
April 15 Quarterly Report		20 (M4) Jul 20 (M7	Oct 20 (M10) Jan 31 (YE)
July 15 Quarterly Report	(C) 12-Day	Primary (12P)	General (12G) Runoff (12R)
October 15 Quarterly Report	Report for the:	Convention (12C)	Special (12S)
January 31 Year-End Report		on on	in the State of
July 31 Mid-Year Report (Non-elect Year Only) (MY)	(d) 30-Day	General (30G)	Runoff (30R) Special (30S)
Termination Repo (TER)		on on	in the State of
5. Covering Period	01	through 06	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Hornaday, Alexander, , ,	f my knowledge and belief it is	true, correct and complete.
Type or Print Name of Treasu	rer		
Signature of Treasurer Ho	ornaday, Alexander, , ,	[Electronically Filed]	Date 07 / 28 / 2017
NOTE: Submission of false, erro	oneous, or incomplete informatio	on may subject the person signin	g this Report to the penalties of 52 U.S.C. § 30109
Office Use			FEC FORM 3X Rev. 05/2016
Only			Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016) Page 2 Write or Type Committee Name CONSERVATIVE LIBERTY COALITION 01 01 2017 06 30 2017 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 19946.00 January 1, 2017 (b) Cash on Hand at 19946.00 Beginning of Reporting Period..... 13148.56 13148.56 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 33094.56 33094.56 6(a) and 6(c) for Column B)..... 31728.31 31728.31 7. Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 1366.25 1366.25 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

CONSERVATIVE LIBERTY COALITION

Utions (other than loans) From: ividuals/Persons Other an Political Committees Itemized (use Schedule A) Unitemized TOTAL (add Lines 11(a)(i) and (ii)	1660.00 10488.56	1660.00
unitemized (use Schedule A)	10488.56	
Unitemized	10488.56	
Unitemized TOTAL (add Lines 11(a)(i) and (ii)	10488.56	
TOTAL (add Lines 11(a)(i) and (ii)	7 7 7	10488.56
TOTAL (add Lines 11(a)(i) and (ii)	10110.50	
	40440.50	
	12148.56	12148.56
litical Party Committons	0.00	0.00
litical Party Committees	4 4	4 4
ch as PACs)	0.00	0.00
als to Line 33, page 5)▶	12148.56	12148.56
rs From Affiliated/Other		
ommittees	0.00	0.00
ns Received	0.00	0.00
anaymenta Reseived	0.00	0.00
	0.00	
· · · · · · · · · · · · · · · · · · ·	1000.00	1000.00
1 - 1	4 4	7 7
Committees	0.00	0.00
ederal Receipts		
nds, Interest, etc.)	0.00	0.00
1 -		
om Schedule H3)	0.00	0.00
n Funds (from Schedule H5)	0.00	0.00
in Fanas (nom Concadie 115)	4	
I Transfers (add 18(a) and 18(b))	0.00	0.00
	cal Contributions (add Lines (a)(iii), (b), and (c)) (Carry tals to Line 33, page 5)	tal Contributions (add Lines (a)(iii), (b), and (c)) (Carry tals to Line 33, page 5)

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)		Caronaa Tour to Date
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating	4 4	
Expenditures	11628.31	11628.31
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	11628.31	11628.31
Transfers to Affiliated/Other Party Committees	0.00	0.00
Contributions to Federal Candidates/Committees	0.00	0.00
and Other Political Committees	0.00	0.00
Independent Expenditures (use Schedule E)	20000.00	20000.00
Coordinated Party Expenditures (52 U.S.C. § 30116(d))	200	4 4 4
(use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	400.00	400.00
man Fondcai Committees	100.00	100.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds		
(add Lines 28(a), (b), and (c))	100.00	100.00
Other Disbursements (Including		
Non-Federal Donations)	0.00	0.00
Federal Election Activity (52 U.S.C. § 30101((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
(c) Total Federal Election Activity (add	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))	31728.31	31728.31
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	6,770	
110111 LITTE 01)	31728.31	31728.31

DETAILED SUMMARY PAGE

of Disbursements

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	12148.56	12148.56
4. Total Contribution Refunds (from Line 28(d))	100.00	100.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	12048.56	12048.56
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	11628.31	11628.31
7. Offsets to Operating Expenditures (from Line 15, page 3)	1000.00	1000.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	10628.31	10628.31

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

F	OR	LINE	NU	MBER	:	PAGE	6	OF	20
(che	ck only	or	ne)					
	X	11a		11b		11c	12	2	
		13		14		15	16	6	17

	Statements may not be sold or used by any persone name and address of any political committee to	
NAME OF COMMITTEE (In Full) CONSERVATIVE LIBERTY CO	OALITION	
Full Name of Individual (Last, First, Middle In Bentley, MaryAnn, , , Mailing Address 853 Sheridan Ln	nitial) or Full Organization Name	Date of Receipt
City	State Zip Code	04 07 2017 Transaction ID : SA11AI.4523
Gardnerville	NV 89460	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer (for Individual) Retired	Occupation (for Individual) Retired	Memo Item Contribution
Receipt For: 2018	Aggregate Year-to-Date ▼	
Full Name of Individual (Last, First, Middle In Bentley, MaryAnn, , , Mailing Address 853 Sheridan Ln	nitial) or Full Organization Name	Date of Receipt
City Gardnerville	State Zip Code NV 89460	Transaction ID : SA11AI.4524 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer (for Individual) Retired	Occupation (for Individual) Retired	Memo Item Contribution
Receipt For: 2018 ✓ Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name of Individual (Last, First, Middle In Bentley, MaryAnn, , ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 853 Sheridan Ln		04 17 2017
City Gardnerville	State Zip Code NV 89460	Transaction ID : SA11AI.4525 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer (for Individual) Retired	Occupation (for Individual) Retired	Memo Item Contribution
Receipt For: 2018 x Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		300.00
TOTAL This Period (last page this line number	r only)	

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

FOR LINE NUMBER: **PAGE** 7 (check only one) **X** 11a 11b 11c

20 OF Use separate schedule(s) 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 LIBERTY COALITION Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Bentley, MaryAnn, , , Date of Receipt Mailing Address 853 Sheridan Ln 20 2017 City Zip Code State Transaction ID: SA11AI.4526 NV Gardnerville 89460 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) Retired Retired Contribution Receipt For: 2018 Aggregate Year-to-Date ▼ x Primary General 600.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Bentley, MaryAnn, , , Date of Receipt Mailing Address 853 Sheridan Ln 16 2017 City State Zip Code Transaction ID: SA11AI.4527 Gardnerville NV 89460 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) Retired Contribution Retired Receipt For: 2018 Aggregate Year-to-Date ▼ Primary General Other (specify) 700.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Bentley, MaryAnn, , , Date of Receipt Mailing Address 853 Sheridan Ln 18 2017 City Zip Code State Transaction ID: SA11AI.4528 NV Gardnerville 89460 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) Contribution Retired Retired Receipt For: 2018 Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) 300.00 SUBTOTAL of Receipts This Page (optional).....

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

FOF	LINE	NU	MBER	:	PAGE	8	OF	20
(che	ck only	or	ne)					
X	11a		11b		11c	12	2	
	13		14		15	16	6	17

	y information copied from such Reports and Stat for commercial purposes, other than using the na				
	NAME OF COMMITTEE (In Full)				
/	CONSERVATIVE LIBERTY COA	LITION	1		
Α.	Full Name of Individual (Last, First, Middle Initial Bentley, MaryAnn, , ,) or Full C	Organ	ization Name	Date of Receipt
	Mailing Address 853 Sheridan Ln				05 26 2017
	City	State		Zip Code	Transaction ID : SA11AI.4529
	Gardnerville	NV		89460	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	Ξ		50.00
	Name of Employer (for Individual)	Occ	cupati	on (for Individual)	Memo Item
	Retired		tired	(Contribution
	Pagaint For: 0040			r-to-Date ▼	33.11.134.131.
	★ Primary General	Aggregate	rea	I-to-Date ▼	
	Other (specify) ▼		-	850.00	
В.	Full Name of Individual (Last, First, Middle Initial Bentley, MaryAnn, , ,) or Full C	Organ	ization Name	Date of Receipt
	Mailing Address 853 Sheridan Ln				06 04 2017
	City	State		Zip Code	Transaction ID : SA11AI.4530
	Gardnerville	NV		89460	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	_		100.00
	Name of Employer (for Individual) Retired		cupat tired	ion (for Individual)	Memo Item Contribution
	Receipt For: 2018 ✓ Primary General Other (specify) ▼	Aggregate	Year	r-to-Date ▼ 950.00	
<u> </u>	Full Name of Individual (Last, First, Middle Initial Buhler, Gayle, , ,) or Full C	Organ	ization Name	Date of Receipt
	Mailing Address 1515 Hyde Park Blvd Apt 36				02 19 2017
	City	State		Zip Code	Transaction ID : SA11AI.4438
	Houston	TX		77006	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			250.00
	Name of Employer (for Individual) None		cupati mema	ion (for Individual)	Memo Item Contribution
	Possint For: 2040	I		r-to-Date ▼	
	rimary General	Aggregate	rea	I-to-Date ▼	
	Other (specify)		-	250.00	
s	UBTOTAL of Receipts This Page (optional)			>	400.00
Т	OTAL This Period (last page this line number on	y)			

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

F	OR	LINE	NU	MBER	:	PAGE	9	OF	20
(0	che	ck only	or	ne)					
	×	11a		11b		11c	12		
		13		14		15	16		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

or	for commercial purposes, other than using the r	name and add	dress of any political committee to	solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) CONSERVATIVE LIBERTY COA	LITION		
A.	Full Name of Individual (Last, First, Middle Initia McManus, Jim, , , Mailing Address PO Box 369 161 Blackwall Ct City Boca Grande FEC ID number of contributing federal political committee. Name of Employer (for Individual) Self Receipt For: 2018 ▼ Primary General Other (specify) ▼	State FL Occup Comm	Zip Code 33921-0369 Pation (for Individual) n. Real Estate ear-to-Date ▼ 450.00	Date of Receipt 04 15 2017 Transaction ID: SA11AI.4661 Amount of Each Receipt this Period 250.00 Memo Item Contribution
В.	Full Name of Individual (Last, First, Middle Initia Millard, Justin Wilson, , , Mailing Address 516 W Briar PI Apt. 11C City Chicago FEC ID number of contributing federal political committee. Name of Employer (for Individual) Unemployed Receipt For: 2018 Primary General Other (specify)	State IL Occup Unem Aggregate Ye	Zip Code 60657 pation (for Individual) aployed ear-to-Date ▼	Date of Receipt 03 02 2017 Transaction ID: SA11AI.4358 Amount of Each Receipt this Period 300.00 Memo Item Contribution
c.	Full Name of Individual (Last, First, Middle Initial Reznick, Melvyn, , , , Mailing Address 4282 Pasadero PI City Tarzana FEC ID number of contributing federal political committee. Name of Employer (for Individual) mreznick@roadrunner.com Receipt For: 2018 x Primary General Other (specify)	State CA C Occup	Zip Code 91356	Date of Receipt M M M / D D / 2017 Transaction ID: SA11AI.4552 Amount of Each Receipt this Period 50.00 Memo Item Contribution
	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number or			600.00
	OIAL THIS I CHOO HASE PAYE THIS THE HUITIDE OF	пу <i>]</i>		

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

F	OR	LINE	NU	MBER	:	PAGE	: ′	10	OF	20
(0	che	ck only	or	ne)						
	X	11a		11b		11c		12		
		13		14		15		16		17

	g the name and address of any political committee	
NAME OF COMMITTEE (In Full) CONSERVATIVE LIBERTY	COALITION	
Full Name of Individual (Last, First, Middl Reznick, Melvyn, , , Mailing Address 4282 Pasadero Pl	e Initial) or Full Organization Name	Date of Receipt
City Tarzana	State Zip Code CA 91356	06 28 2017 Transaction ID : SA11AI.4553 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	60.00
Name of Employer (for Individual) mreznick@roadrunner.com Receipt For: 2018	Occupation (for Individual) Real estate	Memo Item Contribution
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00	
Full Name of Individual (Last, First, Middl 3. Mailing Address	e Initial) or Full Organization Name	Date of Receipt
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	
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, Middl	le Initial) 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)	Occupation (for Individual)	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional	NI)	60.00
TOTAL This Period (last page this line num	nber only)	1660.00

SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 11 OF 20	
TEMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)	
ILWIZED RECEIF 13		Detailed Summary Page	11a 11b 11c 12	
Any information popular from such Dancet	Dintom costs		13 14 X 15 16 17	
Any information copied from such Reports and S or for commercial purposes, other than using the				
NAME OF COMMITTEE (In Full) CONSERVATIVE LIBERTY CO	AL ITIAN			
	JALITION 			
Full Name of Individual (Last, First, Middle In	itial) or Full C	rganization Name	Date of Receipt	
Mailing Address 424 10 St	M = M / D = D / Y = Y = Y			
#4C	01 18 2017			
City New York	State NY	Zip Code 10009	Transaction ID : SA15.4683	
FEC ID number of contributing		10000	Amount of Each Receipt this Period	
federal political committee.	C		1000.00	
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item	
F - 7 - (- · · · · · · · · · · · · · · · · ·		(Refund post election	
Receipt For:	Aggregate	Year-to-Date ▼		
Primary General Other (specify) ▼		1000.00	1	
Carlos (opposity) •	4			
Full Name of Individual (Last, First, Middle In	itial) or Full C	rganization Name		
Mailing Address			Date of Receipt	
Ividinity Address			M M / D D / Y Y Y Y Y	
City	State	Zip Code		
			Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	<u> </u>		
	<u> </u>			
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item	
Receipt For:	Aggregate	Year-to-Date ▼		
Primary General Other (specify) ▼			1	
Cities (specify) •		4	1	
Full Name of Individual (Last, First, Middle In	itial) or Full C	rganization Name	Date of Descript	
Mailing Address			Date of Receipt	
City	State	Zip Code		
EEC ID number of contribution			Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C			
Name of Employer (for Individual)	000	upation (for Individual)	Memo Item	
		apation (ioi individual)	_	
Receipt For:	Aggregate	Year-to-Date ▼		
Primary General Other (specify)			1	
			4	

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

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

1000.00

1000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule				
	for each category of the Detailed Summary Page	ne ge X 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 LIBERTY COALI	•				
Full Name (Last, First, Middle Initial) A- Amagi Strategies			Date of Disbursement		
Mailing Address 424 10 St #4C			06 30 2017		
New York	State Zip Code NY 10009		FEC Identification Number		
Purpose of Disbursement Candidate Name		Category/	Transaction ID : SB21B.4694 Amount of Each Disbursement this Period		
Senate I	Type Office Sought:				
Full Name (Last, First, Middle Initial) B. The Law Office of Alexander Horna Mailing Address 1624 Market St	Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Ste 202 City S	State Zip Code		FEC Identification Number		
Denver Purpose of Disbursement Legal and compliance	CO 80202	001	C		
Candidate Name		Category/ Type	Transaction ID : SB21B.4685 Amount of Each Disbursement this Period 500.00		
Senate	President Disbursement For: Senate Primary General Other (specify)				
Full Name (Last, First, Middle Initial) The Law Office of Alexander Horna	day		Date of Disbursement		
Mailing Address 1624 Market St ste 202			02 / 10 / 2017		
· · · · · · · · · · · · · · · · · · ·	State Zip Code CO 80202	001	FEC Identification Number		
Candidate Name		Category/ Type	Transaction ID: SB21B.4687 Amount of Each Disbursement this Period		
	nent For: Primary Genera Other (specify)		500.00 Memo Item		
SUBTOTAL of Disbursements This Page (optional)			8000.00		
TOTAL This Period (last page this line number only).					

SCHEDULE B (FEC Form 3X)			EOD LINE	INE NUMBER: PAGE 13 OF 20			
ITEMIZED DISBURSEMENTS		rate schedule(s)	(check onl	TTO MEET I.			
		ategory of the summary Page	X 21b	22 23 26 27			
	Dotalica o		28a	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 LIBERTY COAI	LITION						
Full Name (Last, First, Middle Initial)							
A. The Law Office of Alexander Horn	Date of Disbursement						
Mailing Address 1624 Market St ste 202	03 10 2017						
City Denver	State CO	Zip Code 80202		FEC Identification Number			
Purpose of Disbursement		00202		C			
Legal and Compliance			001	Transaction ID : SB21B.4688			
Candidate Name			Category/ Type	Amount of Each Disbursement this Period			
Office Sought: House Disburse	ement For:		.,,,,	500.00			
Senate President	Primary Other (speci	General					
State: District:	J Gillor (opool	.,, v a		Memo Item			
Full Name (Last, First, Middle Initial)							
B. The Law Office of Alexander Horn	Date of Disbursement						
Mailing Address 1624 Market St ste 202				04 10 2017			
City Denver	State CO	Zip Code 80202		FEC Identification Number			
Purpose of Disbursement	5.115.						
Legal and Compliance	Transaction ID : SB21B.4691						
Candidate Name			Category/	Amount of Each Disbursement this Period			
			Type				
	ement For:			500.00			
Senate President	Primary	General		_			
State: District:	Other (speci	iy)		Memo Item			
Full Name (Last, First, Middle Initial)							
C. The Law Office of Alexander Horn	aday			Date of Disbursement			
Mailing Address 1624 Market St ste 202	05 10 2017						
City	State	Zip Code		FEC Identification Number			
Denver	CO	80202					
Purpose of Disbursement Legal and Compliance			001	C			
Candidate Name			Category/ Type	Transaction ID : SB21B.4692 Amount of Each Disbursement this Period			
Office Sought: House Disburse	ement For:		1,700	500.00			
Senate	Primary	General		7 7			
President	Other (speci	fy) 🔻		Memo Item			
State: District:							
SUBTOTAL of Disbursements This Page (optional).			······	1500.00			
TOTAL This Period (last page this line number only	y)						

SCHEDULE B (FEC Form 3X)			EOD LINE	LINE NUMBER: PAGE 14 OF 20			
ITEMIZED DISBURSEMENTS		arate schedule(s)	(check only	TTO MIDELLE.			
		category of the Summary Page	` X 21b	22 23 26 27			
	Dotalled		28a	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 LIBERTY COAI	LITION						
Full Name (Last, First, Middle Initial)							
A. The Law Office of Alexander Horn	Date of Disbursement						
Mailing Address 1624 Market St ste 202	06 10 2017						
City	State CO	Zip Code 80202		FEC Identification Number			
Denver Purpose of Disbursement	- 00	80202					
Legal and Compliance			001	C			
Candidate Name			Category/	Transaction ID: SB21B.4693 Amount of Each Disbursement this Period			
			Туре	500.00			
Office Sought: House Disburse Senate	ement For: Primary	General		300.00			
President	Other (spe			Maria Naria			
State: District:				Memo Item			
Full Name (Last, First, Middle Initial)							
B. Wells Fargo				Date of Disbursement			
Mailing Address 400 Marthagan Ann		01 23 2017					
Mailing Address 420 Montgomery Ave				01 23 2017			
City	State	Zip Code		FEC Identification Number			
San Francisco Purpose of Disbursement	CA	94104					
Bank fees inadvertantly unreported in 2016			001	C			
Candidate Name			Category/	Transaction ID: SB21B.4721 Amount of Each Disbursement this Period			
			Type	Timodik et Eden Biobarcoment time i ened			
	ement For:			606.02			
Senate	Primary Other (spe	General					
State: District:	President Other (specify)						
Full Name (Last, First, Middle Initial)							
C. Wells Fargo				Date of Disbursement			
Mailing Address 420 Montgomery Ave				02 01 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City	Ctota	Zin Cada					
City San Francisco	State CA	Zip Code 94104		FEC Identification Number			
Purpose of Disbursement Bank Fees			001	C			
Candidate Name	Transaction ID : SB21B.4707						
Candidate Manie			Category/ Type	Amount of Each Disbursement this Period			
Office Sought: House Disburse	ement For:		.,,,,	82.50			
Senate	Primary	General		7 7 7			
President	Other (spe	cify) 🔻		Memo Item			
State: District:				_			
SURTOTAL of Dishurasments This Boss (ordinary)				1188.52			
SUBTOTAL of Disbursements This Page (optional)			······	1100.02			
TOTAL This Period (last page this line number only	y)						

SCHEDULE B (FEC Form 3X)						E 15 OF 20		
ITEMIZED DISBURSEMENTS		Use separate schedule(s) (check only for each category of the			<i></i>			
		Summary Page	X 21b 28a	22 28b	23 28c	26 29	27 30b	
Any information conicd from such Deposits and Chate		met be seld av						
Any information copied from such Reports and State or for commercial purposes, other than using the na								
NAME OF COMMITTEE (In Full)								
$ \hspace{.05cm} angle$ CONSERVATIVE LIBERTY COAI	LITION							
Full Name (Last, First, Middle Initial)								
A. Wells Fargo	Date of D	isbursen	nent					
Mailing Address 420 Montgomery Ave	02	10		2017				
Maining Address 420 Monigomery Ave				UZ	10		2017	
City	State	Zip Code		FEC Iden	tification	Number		
San Francisco Purpose of Disbursement	CA	94104					-	
Bank Fee			001	C				
Candidate Name			Category/			D : SB21E Disbursem	3.4705 ent this Period	
			Type	7 unount o	Laon	7100 UT 00111		
	ement For:			1 L	7	-7-	134.00	
Senate President	Primary Other (spe	General						
State: District:	Other (spe	ecity) 🔻		Memo	o Item			
Full Name (Last, First, Middle Initial)								
B. Wells Fargo				Date of D	isbursen	nent		
				M = M	/ D = D		YYY	
Mailing Address 420 Montgomery Ave				03	01		2017	
City	State CA	Zip Code 94104		FEC Iden	tification	Number		
San Francisco Purpose of Disbursement		C						
Bank Fee		action I	D : SB21E	4702				
Candidate Name Category/						_	ent this Period	
Office Country			Type				75.00	
Office Sought: House Disburse Senate	ment For: Primary	General			7		75.00	
President	Other (spe			п				
State: District:	, , ,			Memo	o Item			
Full Name (Last, First, Middle Initial)								
C. Wells Fargo				Date of D	isbursen			
Mailing Address 420 Montgomery Ave				03	10		2017	
City	State CA	Zip Code 94104		FEC Iden	tification	Number		
San Francisco Purpose of Disbursement	CA	94104		C				
Bank Fees			001		saction I	D : SB21E	3 4702	
Candidate Name			Category/			_	ent this Period	
Office Country			Type				126.99	
Office Sought: House Disburse Senate	ement For: Primary	General			7	7	120.99	
President	Other (spe			п.,				
State: District:				Memo	o Item			
							225.00	
SUBTOTAL of Disbursements This Page (optional).			······			7	335.99	
TOTAL This Period (last page this line number only	<i></i>							

SCHEDULE B (FEC Form 3X)						PAGE 16 OF	F 20	
ITEMIZED DISBURSEMENTS		Use separate schedule(s) (check only or each category of the						
		Summary Page	211		23 28c	26 27 29 30b		
Anninformation coming from such Deposits and Chate		mat ha sald av						
Any information copied from such Reports and State or for commercial purposes, other than using the na								
NAME OF COMMITTEE (In Full)								
CONSERVATIVE LIBERTY COAL	LITION							
Full Name (Last, First, Middle Initial)								
A. Wells Fargo	Date of	Date of Disbursement						
Mailian Addus a 400 Mantagram Aug	04	/ D		Y				
Mailing Address 420 Montgomery Ave				04	0;	2017	_	
City	State	Zip Code		FEC Ide	entification	n Number		
San Francisco Purpose of Disbursement	CA	94104						
Bank Fees			001	C				
Candidate Name			Category/			ID: SB21B.4701 Disbursement this Pe	ariad	
			Type	Amount	OI Lacii	Disbursement this 1 to	Silou	
	ement For:			7 L	-9	75.00	1	
Senate President	Primary	General						
State: District:	Other (spe	ecity) 🔻		Me	mo Item			
Full Name (Last, First, Middle Initial)								
B. Wells Fargo				Date of	Disburse	ment		
				M = M	M M / D D / Y Y Y Y			
Mailing Address 420 Montgomery Ave				04	1:	2 2017	_	
City	State CA	Zip Code 94104		FEC Ide	entification	n Number		
San Francisco Purpose of Disbursement								
Bank Fees								
Candidate Name Category/						ID: SB21B.4700 Disbursement this Pe	eriod	
			Туре					
	ment For:	Conoral				122.82	<u>'</u>	
Senate President	Primary Other (spe	General						
State: District:] oo. (ope	,,		Mei	mo Item			
Full Name (Last, First, Middle Initial)								
C. Wells Fargo				Date of	Disburse	ment		
Mailing Address 420 Montgomery Ave				05	/ D		Y	
Mailing Address 420 Montgomery Ave				00			_	
City	State	Zip Code		FEC Ide	entification	n Number		
San Francisco Purpose of Disbursement	CA	94104						
Bank Fee			001	C	noostion	ID : SB21B.4699		
Candidate Name			Category/			Disbursement this Pe	eriod	
			Туре			70.75		
Office Sought: House Disburse Senate	ement For:	Conoral				78.75	,	
President	Primary Other (spe	General						
State: District:	(opc	- J/ ▼		Me Me	mo Item			
							$\overline{\neg}$	
SUBTOTAL of Disbursements This Page (optional).			·····•		-	276.57	7	
TOTAL This Period (last page this line number only	<i>(</i>)						$\neg \neg$	

SCHEDULE B (FEC Form 3X)						PAGE 17 OF 20
ITEMIZED DISBURSEMENTS		parate schedule(s) n category of the	(check only	· — · —	¬ —	
		Summary Page	X 21b 28a	22 28b	23 28c	26 27 29 30b
Any information conicd from such Departs and Clat						
Any information copied from such Reports and Stat or for commercial purposes, other than using the na						
NAME OF COMMITTEE (In Full)						
$ \; angle$ CONSERVATIVE LIBERTY COA	LITION					
Full Name (Last, First, Middle Initial)						
A. Wells Fargo	Date of D	isbursemen	t			
M. III. Add Acceptance Acceptance				M M M	/ D D	/
Mailing Address 420 Montgomery Ave				05	10	2017
City	State	Zip Code		FEC Ident	tification Nu	mber
San Francisco	CA	94104				
Purpose of Disbursement Bank Fees			001	C		
Candidate Name						SB21B.4698 oursement this Period
			Category/ Type	Amount of	Each Disp	ursement this Period
Office Sought: House Disburs	ement For:			l L	7	159.47
Senate	Primary	General				
President State: District:	Other (sp	ecity) \blacktriangledown		Memo	Item	
Full Name (Last, First, Middle Initial)						
B. Wells Fargo				Date of D	isbursemen	t
				M = M	/ D D	/ Y = Y = Y
Mailing Address 420 Montgomery Ave				06	01	2017
City	State CA	Zip Code 94104		FEC Ident	ification Nu	mber
San Francisco Purpose of Disbursement		C				
Bank Fee		action ID :	SB21B.4697			
Candidate Name Category/						oursement this Period
Office Occupies			Type			75.00
Office Sought: House Disburs Senate	ement For: Primary	General			7	75.00
President	Other (sp			п		
State: District:				Memo	Item	
Full Name (Last, First, Middle Initial)						
C. Wells Fargo					isbursemen	
Mailing Address 420 Montgomery Ave				06	12	2017
	la	·				
City San Francisco	State CA	Zip Code 94104		FEC Ident	ification Nu	mber
Purpose of Disbursement	'			С		
Bank Fees			001		action ID :	SB21B.4695
Candidate Name			Category/	Amount of	Each Disb	oursement this Period
Office Sought: House Disburs	ement For:		Туре			92.76
Senate	Primary	General			7	4 4
President	Other (sp	ecify) 🔻		Memo	ltom	
State: District:				L Weine	ACIII	
						327.23
SUBTOTAL of Disbursements This Page (optional)			·····•		7	321.23
TOTAL This Period (last page this line number only	v)					11628.31

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

TEMIZED INDEPENDENT EXPENDITURES				PAGE 18 OF 20 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
CONSERVATIVE LIBERTY COALITIC	NC			C C00575118
				M M / D D / Y Y Y
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	
Full Name of Payee Amagi Strategies		☐ Memo	Item Dat	e of Public Distribution/Dissemination
				02 01 7 2017
Mailing Address 424 10 St			Am	ount
#4C	State	Zip Code	— Г	2000.00
New York	NY	10009		nsaction ID : SE.4717 e of Disbursement or Obligation
Purpose of Expenditure Content Writing, List license, send fees		Category/ Type 004		02 / 01 / 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	ight: House District: 00
KAINE, TIMOTHY MICHAEL, , ,		x Oppose	Pres	sident Senate State: VA
Calendar Year-To-Date Per Election for Office Sought	7	2000.00	Disbursem 2018	nent For: Primary
Full Name of Payee		Memo	Item Dat	e of Public Distribution/Dissemination
Amagi Strategies				03
Mailing Address 424 10 St				
#4C			Am	ount
City New York	State NY	Zip Code 10009		3000.00 ansaction ID : SE.4713 e of Disbursement or Obligation
Purpose of Expenditure Content Writing, List License, Send fees		Category/ Type 004		03 / D1 / 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	ight: House District: 00
WARREN, ELIZABETH, , ,		x Oppose	Pres	sident Senate State: MP
Calendar Year-To-Date Per Election for Office Sought		3000.00	Disbursem 2018	nent For: x Primary General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			· • L	5000.00
(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			
Hornaday, Alexander, , ,	Electronically Fil	[ed]	M M M	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		Date	e 07	2017

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

TEMIZED INDEPENDENT EXPENDITURES				PAGE 19 OF 20 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
CONSERVATIVE LIBERTY COALITIC	N			C C00575118
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		☐ Memo	Item Date	of Public Distribution/Dissemination
Amagi Strategies				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 424 10 St			Amou	unt
#4C				
City	State	Zip Code		3000.00
New York	NY	10009	Date	saction ID : SE.4723 of Disbursement or Obligation
Purpose of Expenditure Content Writing, list license, send fees		Category/ Type 004		04 01 / Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Soug	ht: House District: 00
CRUZ, RAFAEL EDWARD TED, , ,		Oppose	Presid	TV
Calendar Year-To-Date		2000.00	Disburseme	ent For: 🗶 Primary General
Per Election for Office Sought	7 7	3000.00	2018	Other (specify) ▶
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Amagi Strategies				04 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 424 10 St			A	
#4C			Amou	urit
City	State	Zip Code		7000.00
New York	NY	10009	I	nsaction ID : SE.4708 of Disbursement or Obligation
Purpose of Expenditure Content Writing, Email List license, marketing send	fees	Category/ Type 004		04 05 7 2017
Name of Federal Candidate:		✗ Support	Office Soug	ht: X House District: 01
GIANFORTE, GREG, , ,		Oppose	Presid	MT
Calendar Year-To-Date		7000 00	Disburseme	nt For: Primary General
Per Election for Office Sought	7	7000.00	2017	Other (specify) ▶ Special-General
(a) SUBTOTAL of Itemized Independent Expenditures			· > []	10000.00
(b) SUBTOTAL of Unitemized Independent Expenditure	es		· -	7
(c) TOTAL Independent Expenditures				
(c) TOTAL independent Experiationes			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidar party committee) any political party committee or its a	te or authorized			
Hornaday, Alexander, , ,	Electronically File	ed]	M M /	D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		Date	€ 07	28 2017

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

ITEMIZED INDEPENDENT EXPENDITURES				PAGE 20 OF 20 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
CONSERVATIVE LIBERTY COALITI	ON			
				C C00575118
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	M / D = D / Y = Y = Y
Full Name_of Payee		☐ Memo	Item Date of	Public Distribution/Dissemination
Amagi Stratégies				M / D D / Y Y Y Y Y Y Y 14 2017
Mailing Address 424 10 St			Amount	
#4C	State	Zip Code	— [3000.00
New York	NY	10009	Transa	ction ID : SE.4710
Purpose of Expenditure	141			Disbursement or Obligation
Content Writing, Email list license, marketing send f	ees	Category/ Type 004		04 / 14 / 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 Sought:	₩ House District:06
HANDEL, KAREN CHRISTINE, , ,		Oppose	Presider	nt Senate State: GA
Calendar Year-To-Date Per Election for Office Sought	<u> </u>	3000.00	Disbursement 2017	For:
Full Name of Payee		☐ Memo	Item Date of	Public Distribution/Dissemination
Amagi Strategies				01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 424 10 St				
#4C			Amount	
City	State	Zip Code		2000.00
New York	NY	10009		oction ID : SE.4715 Disbursement or Obligation
Purpose of Expenditure Content writing, email list license, send fees		Category/ Type 004	M	01 2017
Name of Federal Candidate:		Support	Office Sought:	House District: 00
BALDWIN, TAMMY, , ,		x Oppose	Presider	
Calendar Year-To-Date		2000.00	Disbursement	For: Primary X General
Per Election for Office Sought	7	2000.00	2018 Oth	ner (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures				5000.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	7
(c) TOTAL Independent Expenditures			•	20000.00
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			
Hornaday, Alexander, , ,	Electronically Fil	led]	M = M /	D D / Y Y Y Y Y
Signature	<u> 2 опишну Г</u> П	_ Date	9 07	28 2017