

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street)
 # 806
 Check if different than previously reported. (ACC) VA

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on in the State of

5. Covering Period 01 / 01 / 2016 through 03 / 31 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer SCOTT B MACKENZIE

Signature of Treasurer SCOTT B MACKENZIE [Electronically Filed] Date 04 / 15 / 2016

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

THE CONSERVATIVE STRIKEFORCE

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>	<input type="text" value="2168.18"/>	<input type="text" value="2168.18"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="2168.18"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="128445.71"/>	<input type="text" value="128445.71"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="130613.89"/>	<input type="text" value="130613.89"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="129165.81"/>	<input type="text" value="129165.81"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="1448.08"/>	<input type="text" value="1448.08"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="500.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

THE CONSERVATIVE STRIKEFORCE

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	8065.00	8065.00
(ii) Unitemized	119880.71	119880.71
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	127945.71	127945.71
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	127945.71	127945.71
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	500.00	500.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	128445.71	128445.71
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	128445.71	128445.71

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	121915.81	121915.81
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	121915.81	121915.81
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	250.00	250.00
(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)).....	250.00	250.00
29. Other Disbursements	7000.00	7000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	129165.81	129165.81
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	129165.81	129165.81

DETAILED SUMMARY PAGE
of Disbursements

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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)	127945.71	127945.71
34. Total Contribution Refunds (from Line 28(d))	250.00	250.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	127695.71	127695.71
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	121915.81	121915.81
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	121915.81	121915.81

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. HARRY B CHATFIELD 300

Full Name (Last, First, Middle Initial)
Mailing Address 1645 LAKES PKWY SUITE E

City LAWRENCEVILLE	State GA	Zip Code 30043
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FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	02	/	2016

Transaction ID : SA11AI.4247

Amount of Each Receipt this Period

300.00

 Memo Item

B. KENNETH J CUSTER 155

Full Name (Last, First, Middle Initial)
Mailing Address 766 GREEN LN

City BEDFORD	State PA	Zip Code 15522
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FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation NURSE
-----------------------------	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	15	/	2016

Transaction ID : SA11AI.4690

Amount of Each Receipt this Period

50.00

 Memo Item

C. KENNETH J CUSTER 155

Full Name (Last, First, Middle Initial)
Mailing Address 766 GREEN LN

City BEDFORD	State PA	Zip Code 15522
-----------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation NURSE
-----------------------------	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	08	/	2016

Transaction ID : SA11AI.4691

Amount of Each Receipt this Period

25.00

 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	375.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 7 OF 41
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. MAE DAWSON 783
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 157
 City State Zip Code
 FULTON TX 78358
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 01 / 2016
Transaction ID : SA11AI.4769
 Amount of Each Receipt this Period
 150.00
 Memo Item

B. MAE DAWSON 783
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 157
 City State Zip Code
 FULTON TX 78358
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 21 / 2016
Transaction ID : SA11AI.4770
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. EDWARD DESZYCK 270
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 31
 City State Zip Code
 BETHANIA NC 27010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 09 / 2016
Transaction ID : SA11AI.4808
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. N STUART DICKSON 809
 Full Name (Last, First, Middle Initial)
 Mailing Address 1735 OSAGE WAY
 City COLORADO SPRINGS State CO Zip Code 80915
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2016
Transaction ID : SA11AI.8545
 Amount of Each Receipt this Period
 40.00
 Memo Item

B. N STUART DICKSON 809
 Full Name (Last, First, Middle Initial)
 Mailing Address 1735 OSAGE WAY
 City COLORADO SPRINGS State CO Zip Code 80915
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 03 / 2016
Transaction ID : SA11AI.8546
 Amount of Each Receipt this Period
 30.00
 Memo Item

C. ROSANNE C DONOVAN 850
 Full Name (Last, First, Middle Initial)
 Mailing Address 520 W CLARENDON AVE UNIT C2
 City PHOENIX State AZ Zip Code 85013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016
Transaction ID : SA11AI.8584
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	170.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. LOIS S EDGERLY 213
Full Name (Last, First, Middle Initial)

Mailing Address 32 HIGHLAND ST

City CAMBRIDGE State MA Zip Code 02138

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

Name of Employer SELF EMPLOYED Occupation INVESTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 01 / 2016

Transaction ID : SA11AI.4389

Amount of Each Receipt this Period
 50.00

Memo Item

B. LOIS S EDGERLY 213
Full Name (Last, First, Middle Initial)

Mailing Address 32 HIGHLAND ST

City CAMBRIDGE State MA Zip Code 02138

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

Name of Employer SELF EMPLOYED Occupation INVESTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2016

Transaction ID : SA11AI.4390

Amount of Each Receipt this Period
 50.00

Memo Item

C. RAYMOND N FINK 488
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 134

City WILLIAMSTON State MI Zip Code 48895

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

Name of Employer SELF EMPLOYED Occupation PHARMACIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 12 / 2016

Transaction ID : SA11AI.4526

Amount of Each Receipt this Period
 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 41
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. RAYMOND N FINK 488
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 134

City WILLIAMSTON	State MI	Zip Code 48895
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FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED	Occupation PHARMACIST
-----------------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 02 / 2016
Transaction ID : SA11AI.4527

Amount of Each Receipt this Period
 30.00

Memo Item

B. RAYMOND N FINK 488
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 134

City WILLIAMSTON	State MI	Zip Code 48895
---------------------	-------------	-------------------

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

Name of Employer SELF EMPLOYED	Occupation PHARMACIST
-----------------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
430.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2016
Transaction ID : SA11AI.4530

Amount of Each Receipt this Period
 100.00

Memo Item

C. RAYMOND N FINK 488
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 134

City WILLIAMSTON	State MI	Zip Code 48895
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FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED	Occupation PHARMACIST
-----------------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
530.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 17 / 2016
Transaction ID : SA11AI.4531

Amount of Each Receipt this Period
 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	230.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. RAYMOND N FINK 488
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 134
 City WILLIAMSTON State MI Zip Code 48895
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation PHARMACIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 630.00

Date of Receipt 03 / 24 / 2016
Transaction ID : SA11AI.4532
 Amount of Each Receipt this Period 100.00
 Memo Item

B. DANIEL D FLOECK 782 SR
 Full Name (Last, First, Middle Initial)
 Mailing Address 25914 PEREGRINE RDG
 City SAN ANTONIO State TX Zip Code 78260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation USAF OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 04 / 2016
Transaction ID : SA11AI.4554
 Amount of Each Receipt this Period 250.00
 Memo Item

C. LESTER FRANKENTHAL 349
 Full Name (Last, First, Middle Initial)
 Mailing Address 1550 NW BUTTONBUSH CIR
 City PALM CITY State FL Zip Code 34990
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 06 / 2016
Transaction ID : SA11AI.4844
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. LESTER FRANKENTHAL 349
Full Name (Last, First, Middle Initial)

Mailing Address 1550 NW BUTTONBUSH CIR

City PALM CITY State FL Zip Code 34990

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 02 / 2016

Transaction ID : SA11AI.4845

Amount of Each Receipt this Period
 100.00

Memo Item

B. ROBERT M GASIOR 605
Full Name (Last, First, Middle Initial)

Mailing Address 5 SHENANDOAH COURT

City BURR RIDGE State IL Zip Code 60527

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 22 / 2016

Transaction ID : SA11AI.4928

Amount of Each Receipt this Period
 250.00

Memo Item

C. DR SHIRLEY H GRAHAM 558
Full Name (Last, First, Middle Initial)

Mailing Address 4607 OTSEGO STREET

City DULUTH State MN Zip Code 55804

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

Name of Employer Occupation
 BAY CARE PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 17 / 2016

Transaction ID : SA11AI.5052

Amount of Each Receipt this Period
 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. GREGORY HANCOCK 790
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 293
 City OLTON State TX Zip Code 79064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2016
Transaction ID : SA11AI.5160
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. PAT R HEYLAND 741
 Full Name (Last, First, Middle Initial)
 Mailing Address 4432 E 90TH PL
 City TULSA State OK Zip Code 74137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 04 / 2016
Transaction ID : SA11AI.5298
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. WILLIAM JONES 857
 Full Name (Last, First, Middle Initial)
 Mailing Address 1931 W GRANT RD
 City TUCSON State AZ Zip Code 85745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 02 / 2016
Transaction ID : SA11AI.5593
 Amount of Each Receipt this Period
 300.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1050.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 41
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. PEGGY JONES 940
 Full Name (Last, First, Middle Initial)
 Mailing Address 862 CHILTERN RD
 City Hillsborough State CA Zip Code 94010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **235.00**

Date of Receipt **03 / 14 / 2016**
Transaction ID : SA11AI.5597
 Amount of Each Receipt this Period **100.00**
 Memo Item

B. KATHY FLOURNOY KING 770
 Full Name (Last, First, Middle Initial)
 Mailing Address 5411 ANSDELL CT
 City Houston State TX Zip Code 77084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt **03 / 17 / 2016**
Transaction ID : SA11AI.5702
 Amount of Each Receipt this Period **500.00**
 Memo Item

C. KATHY FLOURNOY KING 770
 Full Name (Last, First, Middle Initial)
 Mailing Address 5411 ANSDELL CT
 City Houston State TX Zip Code 77084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **750.00**

Date of Receipt **03 / 22 / 2016**
Transaction ID : SA11AI.5703
 Amount of Each Receipt this Period **250.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	850.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. LIONEL MARSAVELA 923
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 1548
 City LOMA LINDA State CA Zip Code 92354
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 30 / 2016
Transaction ID : SA11AI.6104
 Amount of Each Receipt this Period
 40.00
 Memo Item

B. PRUDENCE MILLER 972
 Full Name (Last, First, Middle Initial)
 Mailing Address 4220 SW GREENLEAF DR
 City PORTLAND State OR Zip Code 97221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2016
Transaction ID : SA11AI.6744
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. PRUDENCE M MILLER 972
 Full Name (Last, First, Middle Initial)
 Mailing Address 4220 SW GREENLEAF DR
 City PORTLAND State OR Zip Code 97221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 05 / 2016
Transaction ID : SA11AI.6742
 Amount of Each Receipt this Period
 300.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	840.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 41
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. PATRICIA A MIXTER 200

Full Name (Last, First, Middle Initial)
Mailing Address 4225 43RD STREET NW

City WASHINGTON	State DC	Zip Code 20016
--------------------	-------------	-------------------

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

Name of Employer NONE	Occupation HOMEMAKER
--------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 13 / 2016
Transaction ID : SA11AI.6774

Amount of Each Receipt this Period
 50.00

Memo Item

B. PATRICIA A MIXTER 200

Full Name (Last, First, Middle Initial)
Mailing Address 4225 43RD STREET NW

City WASHINGTON	State DC	Zip Code 20016
--------------------	-------------	-------------------

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

Name of Employer NONE	Occupation HOMEMAKER
--------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 14 / 2016
Transaction ID : SA11AI.6775

Amount of Each Receipt this Period
 50.00

Memo Item

C. PATRICIA A MIXTER 200

Full Name (Last, First, Middle Initial)
Mailing Address 4225 43RD STREET NW

City WASHINGTON	State DC	Zip Code 20016
--------------------	-------------	-------------------

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

Name of Employer NONE	Occupation HOMEMAKER
--------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 15 / 2016
Transaction ID : SA11AI.6776

Amount of Each Receipt this Period
 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 41
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. GREGG M OLSEN 836
 Full Name (Last, First, Middle Initial)
 Mailing Address 1059 E IRON EAGLE DR
 City EAGLE State ID Zip Code 83616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation AMERISOURCE CORPORATION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 05 / 2016
Transaction ID : SA11AI.6981
 Amount of Each Receipt this Period 500.00
 Memo Item

B. DALE OYHUS 586
 Full Name (Last, First, Middle Initial)
 Mailing Address 13973 FRANKS CREEK RD
 City MEDORA State ND Zip Code 58645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation SELF EMPLOYED RANCHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 01 / 2016
Transaction ID : SA11AI.7011
 Amount of Each Receipt this Period 60.00
 Memo Item

C. MS DOROTHY RALSTON 060
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 DEVONWOOD DR APT 178
 City FARMINGTON State CT Zip Code 06032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 31 / 2016
Transaction ID : SA11AI.7242
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1060.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 18 OF 41
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. NORMAN A ROBERT 708
 Full Name (Last, First, Middle Initial)
 Mailing Address 1908 HERMADEL DR
 City State Zip Code
 BATON ROUGE LA 70816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2016
Transaction ID : SA11AI.7389
 Amount of Each Receipt this Period
 150.00
 Memo Item

B. NORMAN A ROBERT 708
 Full Name (Last, First, Middle Initial)
 Mailing Address 1908 HERMADEL DR
 City State Zip Code
 BATON ROUGE LA 70816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 15 / 2016
Transaction ID : SA11AI.7393
 Amount of Each Receipt this Period
 150.00
 Memo Item

C. NORMAN A ROBERT 708
 Full Name (Last, First, Middle Initial)
 Mailing Address 1908 HERMADEL DR
 City State Zip Code
 BATON ROUGE LA 70816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 23 / 2016
Transaction ID : SA11AI.7394
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. SIDNEY SEALE 968
Full Name (Last, First, Middle Initial)

Mailing Address 400 HOBRON LN APT 807

City HONOLULU	State HI	Zip Code 96815
------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	23	/	2016

Transaction ID : SA11AI.7687

Amount of Each Receipt this Period
200.00

Memo Item

B. SIDNEY S SEALE 968
Full Name (Last, First, Middle Initial)

Mailing Address 400 HOBRON LN APT 807

City HONOLULU	State HI	Zip Code 96815
------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	07	/	2016

Transaction ID : SA11AI.7686

Amount of Each Receipt this Period
200.00

Memo Item

C. JAMES N SYLTE 565
Full Name (Last, First, Middle Initial)

Mailing Address 215 SKOGMO BLVD

City FERGUS FALLS	State MN	Zip Code 56537
----------------------	-------------	-------------------

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

Name of Employer US ARMY	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	06	/	2016

Transaction ID : SA11AI.8009

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	425.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. JAMES N SYLTE 565
 Full Name (Last, First, Middle Initial)
 Mailing Address 215 SKOGMO BLVD
 City FERGUS FALLS State MN Zip Code 56537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer US ARMY Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 01 / 2016
Transaction ID : SA11AI.8010
 Amount of Each Receipt this Period 30.00
 Memo Item

B. JAMES N SYLTE 565
 Full Name (Last, First, Middle Initial)
 Mailing Address 215 SKOGMO BLVD
 City FERGUS FALLS State MN Zip Code 56537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer US ARMY Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 12 / 2016
Transaction ID : SA11AI.8011
 Amount of Each Receipt this Period 50.00
 Memo Item

C. JAMES N SYLTE 565
 Full Name (Last, First, Middle Initial)
 Mailing Address 215 SKOGMO BLVD
 City FERGUS FALLS State MN Zip Code 56537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer US ARMY Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 03 / 17 / 2016
Transaction ID : SA11AI.8012
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 115.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. JAMES N SYLTE 565
 Full Name (Last, First, Middle Initial)
 Mailing Address 215 SKOGMO BLVD
 City FERGUS FALLS State MN Zip Code 56537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer US ARMY Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt 03 / 24 / 2016
Transaction ID : SA11AI.8013
 Amount of Each Receipt this Period 50.00
 Memo Item

B. CHARLIE VAN JANKINS 549
 Full Name (Last, First, Middle Initial)
 Mailing Address 370 S KOELLER ST
 City OSHKOSH State WI Zip Code 54902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer STATE FARM INS Occupation SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 14 / 2016
Transaction ID : SA11AI.8188
 Amount of Each Receipt this Period 250.00
 Memo Item

C. STEPHEN E WATKINS 974
 Full Name (Last, First, Middle Initial)
 Mailing Address 26006 VISTA DR
 City VENETA State OR Zip Code 97487
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PELICAN BUILDERS Occupation CONST WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 01 / 05 / 2016
Transaction ID : SA11AI.8281
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. RONALD WHANN 975
 Full Name (Last, First, Middle Initial)
 Mailing Address 8278 24TH ST
 City WHITE CITY State OR Zip Code 97503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation ARCHITECH
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **03 / 21 / 2016**
Transaction ID : SA11AI.8320
 Amount of Each Receipt this Period **100.00**
 Memo Item

B. JUDY WHEATON 394
 Full Name (Last, First, Middle Initial)
 Mailing Address 14 STACY DRIVE
 City PICAYUNE State MS Zip Code 39466
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **02 / 22 / 2016**
Transaction ID : SA11AI.8322
 Amount of Each Receipt this Period **250.00**
 Memo Item

C. JOANNA WORLEY 871
 Full Name (Last, First, Middle Initial)
 Mailing Address 10141 MASTERS DR NE
 City ALBUQUERQUE State NM Zip Code 87111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation PUB ACCOUNTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **02 / 19 / 2016**
Transaction ID : SA11AI.8465
 Amount of Each Receipt this Period **50.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	8065.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 41
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input checked="" type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. SCOTT B MACKENZIE
 Full Name (Last, First, Middle Initial)
 Mailing Address 2776 S ARLINGTON MILL DRIVE #806

City ARLINGTON	State VA	Zip Code 22206
-------------------	-------------	-------------------

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

Name of Employer MACKENZIE & COMPANY	Occupation CONSULTANT
---	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 22 / 2016

Transaction ID : SA13.4171

Amount of Each Receipt this Period
400.00

Memo Item
PERSONAL LOAN

B. SCOTT B MACKENZIE
 Full Name (Last, First, Middle Initial)
 Mailing Address 2776 S ARLINGTON MILL DRIVE #806

City ARLINGTON	State VA	Zip Code 22206
-------------------	-------------	-------------------

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

Name of Employer MACKENZIE & COMPANY	Occupation CONSULTANT
---	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2016

Transaction ID : SA13.4172

Amount of Each Receipt this Period
100.00

Memo Item
PERSONAL LOAN

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	500.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

A. ACTIVE ENGAGEMENT

Full Name (Last, First, Middle Initial)

Mailing Address 44084 RIVERSIDE PARKWAY
SUITE 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement PAC DIRECT RESPONSE FUNRAISING

Candidate Name **THE CONSERVATIVE STRIKEFORCE**

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
01 / 12 / 2016

Transaction ID : **SB21B.4213**

Amount of Each Disbursement this Period: 62.50

Memo Item

B. ACTIVE ENGAGEMENT

Full Name (Last, First, Middle Initial)

Mailing Address 44084 RIVERSIDE PARKWAY
SUITE 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement WEBSITE LANDING PAGE

Candidate Name **THE CONSERVATIVE STRIKEFORCE**

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
01 / 22 / 2016

Transaction ID : **SB21B.4173**

Amount of Each Disbursement this Period: 500.00

Memo Item

C. ACTIVE ENGAGEMENT

Full Name (Last, First, Middle Initial)

Mailing Address 44084 RIVERSIDE PARKWAY
SUITE 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement PAC DIRECT RESPONSE FUNRAISING

Candidate Name **THE CONSERVATIVE STRIKEFORCE**

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
01 / 27 / 2016

Transaction ID : **SB21B.4214**

Amount of Each Disbursement this Period: 500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1062.50

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. ACTIVE ENGAGEMENT

Mailing Address 44084 RIVERSIDE PARKWAY
SUITE 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement
PAC DIRECT RESPONSE FUNRAISING

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
02 / 09 / 2016

Transaction ID : SB21B.4215

Amount of Each Disbursement this Period

37.50

Memo Item

Full Name (Last, First, Middle Initial)

B. ACTIVE ENGAGEMENT

Mailing Address 44084 RIVERSIDE PARKWAY
SUITE 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement
PAC DIRECT RESPONSE FUNRAISING

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
02 / 25 / 2016

Transaction ID : SB21B.4216

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. ACTIVE ENGAGEMENT

Mailing Address 44084 RIVERSIDE PARKWAY
SUITE 350

City LANSDOWNE State VA Zip Code 20176

Purpose of Disbursement
PAC DIRECT RESPONSE FUNRAISING

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
03 / 08 / 2016

Transaction ID : SB21B.4217

Amount of Each Disbursement this Period

2147.50

Memo Item

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

3185.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. ACTIVE ENGAGEMENT

Mailing Address 44084 RIVERSIDE PARKWAY
SUITE 350

City LANSLOWNE State VA Zip Code 20176

Purpose of Disbursement
PAC DIRECT RESPONSE FUNRAISING

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 29 / 2016

Transaction ID : **SB21B.4218**

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. AMBASSADOR ACCOUNTING INC

Mailing Address 7521 PRESIDENTIAL LN

City MANASSAS State VA Zip Code 20109

Purpose of Disbursement
ESCROW SERVICES

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 29 / 2016

Transaction ID : **SB21B.4222**

Amount of Each Disbursement this Period

89.50

Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN LIBERTY GROUP

Mailing Address 611 PENNSYLVANIA AVE SE
SUITE 227

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAC DIRECT RESPONSE FUNRAISING

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 07 / 2016

Transaction ID : **SB21B.4201**

Amount of Each Disbursement this Period

8383.40

Memo Item

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

10472.90

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. AMERICAN LIBERTY GROUP

Mailing Address 611 PENNSYLVANIA AVE SE
SUITE 227

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAC DIRECT RESPONSE FUNRAISING

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
01 / 14 / 2016

Transaction ID : **SB21B.4203**

Amount of Each Disbursement this Period

12591.88

Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN LIBERTY GROUP

Mailing Address 611 PENNSYLVANIA AVE SE
SUITE 227

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAC DIRECT RESPONSE FUNRAISING

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
01 / 21 / 2016

Transaction ID : **SB21B.4204**

Amount of Each Disbursement this Period

12411.26

Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN LIBERTY GROUP

Mailing Address 611 PENNSYLVANIA AVE SE
SUITE 227

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAC DIRECT RESPONSE FUNRAISING

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
01 / 29 / 2016

Transaction ID : **SB21B.4205**

Amount of Each Disbursement this Period

13399.00

Memo Item

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

38402.14

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. AMERICAN LIBERTY GROUP

Mailing Address 611 PENNSYLVANIA AVE SE
SUITE 227

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAC DIRECT RESPONSE FUNRAISING

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 04 / 2016

Transaction ID : SB21B.4206

Amount of Each Disbursement this Period

11459.14

Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN LIBERTY GROUP

Mailing Address 611 PENNSYLVANIA AVE SE
SUITE 227

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAC DIRECT RESPONSE FUNRAISING

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 11 / 2016

Transaction ID : SB21B.4207

Amount of Each Disbursement this Period

10937.00

Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN LIBERTY GROUP

Mailing Address 611 PENNSYLVANIA AVE SE
SUITE 227

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAC DIRECT RESPONSE FUNRAISING

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 25 / 2016

Transaction ID : SB21B.4208

Amount of Each Disbursement this Period

1542.00

Memo Item

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

23938.14

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. AMERICAN LIBERTY GROUP

Mailing Address 611 PENNSYLVANIA AVE SE
SUITE 227

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAC DIRECT RESPONSE FUNRAISING

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 10 / 2016

Transaction ID : SB21B.4209

Amount of Each Disbursement this Period

10000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN LIBERTY GROUP

Mailing Address 611 PENNSYLVANIA AVE SE
SUITE 227

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAC DIRECT RESPONSE FUNRAISING

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 17 / 2016

Transaction ID : SB21B.4210

Amount of Each Disbursement this Period

9855.00

Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN LIBERTY GROUP

Mailing Address 611 PENNSYLVANIA AVE SE
SUITE 227

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAC DIRECT RESPONSE FUNRAISING

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : SB21B.4211

Amount of Each Disbursement this Period

8221.00

Memo Item

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

28076.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. AMERICAN LIBERTY GROUP

Mailing Address 611 PENNSYLVANIA AVE SE
SUITE 227

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAC DIRECT RESPONSE FUNRAISING

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2016

Transaction ID : **SB21B.4212**

Amount of Each Disbursement this Period

3640.00

Memo Item

Full Name (Last, First, Middle Initial)

B. BAKER HOSTETLER LLP

Mailing Address PO BOX 70189

City CLEVELAND State OH Zip Code 44190

Purpose of Disbursement
LEGAL FEES

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
01 / 08 / 2016

Transaction ID : **SB21B.4188**

Amount of Each Disbursement this Period

3343.22

Memo Item

Full Name (Last, First, Middle Initial)

C. CLIENT FIRST CONSULTING GROUP

Mailing Address 385 AVERY LN

City MEDINA State OH Zip Code 44256

Purpose of Disbursement
PAC DIRECT RESPONSE FUNRAISING

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
01 / 07 / 2016

Transaction ID : **SB21B.4230**

Amount of Each Disbursement this Period

300.00

Memo Item

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

7283.22

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. CLIENT FIRST CONSULTING GROUP

Mailing Address 385 AVERY LN

City MEDINA State OH Zip Code 44256

Purpose of Disbursement
PAC DIRECT RESPONSE FUNRAISING

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
01 / 22 / 2016

Transaction ID : SB21B.4231

Amount of Each Disbursement this Period

50.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CLIENT FIRST CONSULTING GROUP

Mailing Address 385 AVERY LN

City MEDINA State OH Zip Code 44256

Purpose of Disbursement
PAC DIRECT RESPONSE FUNRAISING

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2016

Transaction ID : SB21B.4232

Amount of Each Disbursement this Period

100.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CLIENT FIRST CONSULTING GROUP

Mailing Address 385 AVERY LN

City MEDINA State OH Zip Code 44256

Purpose of Disbursement
PAC DIRECT RESPONSE FUNRAISING

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
02 / 22 / 2016

Transaction ID : SB21B.4233

Amount of Each Disbursement this Period

100.00

Memo Item

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

250.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. CLIENT FIRST CONSULTING GROUP

Mailing Address 385 AVERY LN

City MEDINA State OH Zip Code 44256

Purpose of Disbursement
PAC DIRECT RESPONSE FUNRAISING

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
02 / 29 / 2016

Transaction ID : **SB21B.4234**

Amount of Each Disbursement this Period

100.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CLIENT FIRST CONSULTING GROUP

Mailing Address 385 AVERY LN

City MEDINA State OH Zip Code 44256

Purpose of Disbursement
PAC DIRECT RESPONSE FUNRAISING

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
03 / 07 / 2016

Transaction ID : **SB21B.4235**

Amount of Each Disbursement this Period

100.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CLIENT FIRST CONSULTING GROUP

Mailing Address 385 AVERY LN

City MEDINA State OH Zip Code 44256

Purpose of Disbursement
PAC DIRECT RESPONSE FUNRAISING

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
03 / 16 / 2016

Transaction ID : **SB21B.4236**

Amount of Each Disbursement this Period

200.00

Memo Item

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

400.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. CLIENT FIRST CONSULTING GROUP

Mailing Address 385 AVERY LN

City MEDINA State OH Zip Code 44256

Purpose of Disbursement
PAC DIRECT RESPONSE FUNRAISING

003

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
03 / 18 / 2016

Transaction ID : SB21B.4237

Amount of Each Disbursement this Period

200.00

Memo Item

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement
GLOBAL SERVICES DISCOUNT FEE

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
01 / 05 / 2016

Transaction ID : SB21B.4193

Amount of Each Disbursement this Period

1175.07

Memo Item

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement
SERVICE CHARGE

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2016

Transaction ID : SB21B.4191

Amount of Each Disbursement this Period

79.86

Memo Item

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

1454.93

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)
THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
GLOBAL SERVICES DISCOUNT FEE

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
02 / 02 / 2016

Transaction ID : SB21B.4194

Amount of Each Disbursement this Period

3053.00

Memo Item

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
SERVICE CHARGE

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
03 / 01 / 2016

Transaction ID : SB21B.4192

Amount of Each Disbursement this Period

81.53

Memo Item

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
GLOBAL SERVICES DISCOUNT FEE

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
03 / 02 / 2016

Transaction ID : SB21B.4195

Amount of Each Disbursement this Period

1258.71

Memo Item

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

4393.24

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. US POSTMASTER

Mailing Address MAIN POST OFFICE

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
PO BOX RENEWAL

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
01 / 28 / 2016

Transaction ID : SB21B.4196

Amount of Each Disbursement this Period

666.00

Memo Item

Full Name (Last, First, Middle Initial)

B. WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement
CAGING & ESCROW SERVICES

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
01 / 19 / 2016

Transaction ID : SB21B.4197

Amount of Each Disbursement this Period

363.74

Memo Item

Full Name (Last, First, Middle Initial)

C. WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement
CAGING & ESCROW SERVICES

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
01 / 21 / 2016

Transaction ID : SB21B.4199

Amount of Each Disbursement this Period

393.12

Memo Item

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

1422.86

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)
A. WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement CAGING & ESCROW SERVICES

Candidate Name THE CONSERVATIVE STRIKEFORCE

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
03 / 10 / 2016

Transaction ID : SB21B.4200

Amount of Each Disbursement this Period: 854.76

Memo Item

Full Name (Last, First, Middle Initial)
B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)
C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 854.76

TOTAL This Period (last page this line number only)..... ▶ 121195.69

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

A. ACTIVE ENGAGEMENT

Mailing Address 44084 RIVERSIDE PARKWAY
SUITE 350

City LANSLOWNE State VA Zip Code 20176

Purpose of Disbursement
REIMBURSEMENT OF LEGAL FEES RELATED TO LAWSUIT

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 / 08 / 2016

Transaction ID : SB29.4187

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. SHULMAN ROGERS GANDAL PA

Mailing Address 12505 PARK POTOMAC AVE
6TH FLOOR

City POTOMAC State MD Zip Code 20854

Purpose of Disbursement
LEGAL FEES RELATED TO LAWSUIT

001

Candidate Name
THE CONSERVATIVE STRIKEFORCE

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 19 / 2016

Transaction ID : SB29.4227

Amount of Each Disbursement this Period

6000.00

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Memo Item

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

7000.00

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

7000.00

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4171**
THE CONSERVATIVE STRIKEFORCE

LOAN SOURCE Full Name (Last, First, Middle Initial) SCOTT B MACKENZIE	<input type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 2776 S ARLINGTON MILL DRIVE #806		
City ARLINGTON	State VA	ZIP Code 22206

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
400.00	0.00	400.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
MM / DD / YYYY 01 / 22 / 2016	MM / DD / YYYY UPON REQUEST	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

SUBTOTALS This Period This Page (optional).....▶	400.00
TOTALS This Period (last page in this line only).....▶	[]

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

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4172**
THE CONSERVATIVE STRIKEFORCE

LOAN SOURCE Full Name (Last, First, Middle Initial) SCOTT B MACKENZIE	<input type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 2776 S ARLINGTON MILL DRIVE #806		
City ARLINGTON	State VA	ZIP Code 22206

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
100.00	0.00	100.00

TERMS

Date Incurred: MM / DD / YYYY (03 / 07 / 2016)
Date Due: MM / DD / YYYY (UPON REQUEST)
Interest Rate: 0.00 % (apr)
Secured: Yes No

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

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

SUBTOTALS This Period This Page (optional).....▶	100.00
TOTALS This Period (last page in this line only).....▶	500.00

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

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) THE CONSERVATIVE STRIKEFORCE		FEC IDENTIFICATION NUMBER C C00457291
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name of Payee ACTIVE ENGAGEMENT		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 19 / 2016	
Mailing Address 44084 RIVERSIDE PARKWAY SUITE 350		Amount 1000.00		
City LANSDOWNE	State VA	Zip Code 20176	Transaction ID : SE.4151	
Purpose of Expenditure VOTER CONTACT eMAIL		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 02 / 19 / 2016	
Name of Federal Candidate MIA LOVE		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> President <input type="checkbox"/> Senate	District: 04 State: UT
Calendar Year-To-Date Per Election for Office Sought		0.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee ACTIVE ENGAGEMENT		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 29 / 2016	
Mailing Address 44084 RIVERSIDE PARKWAY SUITE 350		Amount 1100.00		
City LANSDOWNE	State VA	Zip Code 20176	Transaction ID : SE.4157	
Purpose of Expenditure VOTER CONTACT eMAIL		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 02 / 29 / 2016	
Name of Federal Candidate MARK STEVEN KIRK		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate	District: 00 State: IL
Calendar Year-To-Date Per Election for Office Sought		0.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(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.

SCOTT B MACKENZIE

Signature _____ Date MM / DD / YYYY 04 / 15 / 2016

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) THE CONSERVATIVE STRIKEFORCE		FEC IDENTIFICATION NUMBER C C00457291
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name of Payee ACTIVE ENGAGEMENT		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 21 / 2016
Mailing Address 44084 RIVERSIDE PARKWAY SUITE 350			Amount 1000.00
City LANSDOWNE	State VA	Zip Code 20176	Transaction ID : SE.4163
Purpose of Expenditure VOTER CONTACT eMAIL	Category/Type 004		Date of Disbursement or Obligation MM / DD / YYYY 03 / 21 / 2016
Name of Federal Candidate MIA LOVE	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> President <input type="checkbox"/> Senate	District: 04 State: UT
Calendar Year-To-Date Per Election for Office Sought	0.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	2016

Full Name of Payee		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY
Mailing Address			Amount
City	State	Zip Code	Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure	Category/Type		
Name of Federal Candidate	<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> President <input type="checkbox"/> Senate	District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	0.00

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.

SCOTT B MACKENZIE

Signature _____ [Electronically Filed] Date **04 / 15 / 2016**