

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 1
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Virginians for Conservative Leaders			FEC IDENTIFICATION NUMBER ▼ C C00864173	
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on			MM / DD / YYYY	
Full Name of Payee point1		Date of Public Distribution/Dissemination MM / DD / YYYY		
Mailing Address 1425 Omni Blvd		Amount 11888.32		
City Mount Pleasant	State SC	Zip Code 29466	Transaction ID : SE.4107	
Purpose of Expenditure Direct Mail		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate GOOD, ROBERT G. HON., , ,		☐ Support ☒ Oppose	Office Sought: ☒ House District: 05 ☐ President ☐ Senate State: VA	
Calendar Year-To-Date Per Election for Office Sought		11888.32	Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
Full Name of Payee		Date of Public Distribution/Dissemination		
Mailing Address		Amount		
City	State	Zip Code	Date of Disbursement or Obligation	
Purpose of Expenditure		Category/ Type	MM / DD / YYYY	
Name of Federal Candidate		☐ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☐ Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures.....		11888.32		
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures.....		11888.32		
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.				
Signature Datwyler, Thomas, , ,		Date MM / DD / YYYY		