

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>CONSERVATIVE MAJORITY FUND</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00524454
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 (Last, First, Middle Initial) of Payee <b>INFOCISION MANAGEMENT CORP</b> <b>[MEMO ITEM]</b>		Date MM / DD / YYYY 09 / 18 / 2012
Mailing Address 325 SPRINGSIDE DR		Amount 43.54
City AKRON      State OH      Zip Code 44321	<b>Transaction ID : SE.6038</b>	
Purpose of Expenditure VOTER CONTACT CALLS	Category/ Type 004	Office Sought: <input type="checkbox"/> House      State: WY <input type="checkbox"/> Senate      District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee <b>INFOCISION MANAGEMENT CORP</b> <b>[MEMO ITEM]</b>		Date MM / DD / YYYY 09 / 18 / 2012
Mailing Address 325 SPRINGSIDE DR		Amount 51.53
City AKRON      State OH      Zip Code 44321	<b>Transaction ID : SE.6039</b>	
Purpose of Expenditure VOTER CONTACT CALLS	Category/ Type 004	Office Sought: <input type="checkbox"/> House      State: DC <input type="checkbox"/> Senate      District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

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

Signature SCOTT B MACKENZIE      Date MM / DD / YYYY 10 / 15 / 2012

*[Electronically Filed]*