PAGE 1 / 35

# **FEC**

#### **REPORT OF RECEIPTS AND DISBURSEMENTS**

FURIVI 3A	For C	Other Than An A	uthorized	d Commit	tee		Office Us	se Only	
NAME OF COMMITTEE (in f		OR PRINT ▼		ample: If typer the lines.	ping, type	12FE	4M5		
COURAGEOUS	CONSER	VATIVES PAC	<b>,</b>				1 1 1		
ADDRESS (number and	rent	2 Yeardley Ave							
than previous reported. (AC		nchburg					24501		
2. FEC IDENTIFICA	TION NUMBE	R ▼	CITY A			STATE A		ZIP COD	E 🛦
C C00587022		3.	IS THIS REPORT		NEW (N) OR	x	AMENDED (A)		
4. TYPE OF REPO (Choose One)  (a) Quarterly Repo		Report Due On:	Feb 20 (M2) Mar 20 (M3) Apr 20 (M4)		May 20 (M5) Jun 20 (M6) Jul 20 (M7)	ĕ	Aug 20 (M8) Sep 20 (M9) Oct 20 (M10)		Nov 20 (M11) Non-Election Year Only) Dec 20 (M12) Non-Election Year Only) Jan 31 (YE)
July 15 Quarterly October 1 Quarterly January 3	Report (Q3)	(c) 12-Day PRE-Election Report for the	ection on	Primary (12		=	eral (12G) cial (12S)	in the State of	Runoff (12R)
July 31 M	on-election () (MY)	(d) 30-Day POST-Election Report for the	n 🔲	General (30	OG)	Run	off (30R)	_	Special (30S)
5. Covering Period	09 /	01 / 201	8	through	09	30	20	18	
I certify that I have exa Type or Print Name of	Fa	port and to the best hy, Amanda, , ,	of my kno	wledge and	belief it is tr	ue, correc	t and comple	te.	
Signature of Treasurer	Fahy, Aman	da, , ,		[Electronica	lly Filed]		01 / 14	D / Y	2019
NOTE: Submission of fa	lse, erroneous,	or incomplete informa	ation may su	ubject the pe	erson signing t	this Report	to the penalti	es of 52 l	J.S.C. § 30109
Office Use								FORN Rev. 05/201	

#### **SUMMARY PAGE** OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016) Page 2

Write or Type Committee Name

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5.	(a) Cash on Hand January 1,  2018		2510.43
	(b) Cash on Hand at Beginning of Reporting Period	41650.48	
	(c) Total Receipts (from Line 19)	140.00	176551.00
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	41790.48	179061.43
7.	Total Disbursements (from Line 31)	11614.80	148885.75
3.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	30175.68	30175.68
9.	Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	294251.32	

#### 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

#### COURAGEOUS CONSERVATIVES PAC

I. Receipts  Is (other than loans) From:  In (other than loans) From:  In (ultimate of the properties	0.00 140.00	COLUMN B Calendar Year-to-Date  147500.00  551.00
uals/Persons Other Political Committees mized (use Schedule A) itemized TAL (add es 11(a)(i) and (ii)  al Party Committees	140.00	551.00
Political Committees mized (use Schedule A) itemized TAL (add es 11(a)(i) and (ii)  al Party Committees	140.00	551.00
itemized  TAL (add es 11(a)(i) and (ii)  Al Party Committees	140.00	551.00
itemized  TAL (add es 11(a)(i) and (ii)  al Party Committees	140.00	551.00
TAL (add es 11(a)(i) and (ii)  al Party Committees	140.00	
TAL (add es 11(a)(i) and (ii)  al Party Committees		148051.00
es 11(a)(i) and (ii)		148051 00
		140031.00
	0.00	0.00
	0.00	4 4
as PACs)	0.00	0.00
Contributions (add Lines	492 492	45 45
	140.00	148051.00
mittees	0.00	0.00
Received	0.00	28500.00
	0.00	0.00
	0.00	0.00
· · · · · · · · · · · · · · · · · · ·	0.00	0.00
	4	
mmittees	0.00	0.00
ral Receipts		
	0.00	0.00
	7 1 2 1	7
Schedule H3)	0.00	0.00
unds (from Schedule H5)	0.00	0.00
and (nom concade no)	4 4	
ansfers (add 18(a) and 18(b))	0.00	0.00
i Fig.	ii), (b), and (c)) (Carry to Line 33, page 5)	ii), (b), and (c)) (Carry to Line 33, page 5)

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements		Total This Period		
<ol> <li>Operating Expenditures         <ul> <li>(a) Allocated Federal/ Activity (from Sche</li> </ul> </li> </ol>	Non-Federal		Calendar Year-to-Date	
• ,	e	0.00	0.00	
(ii) Non-Federal S	Share	0.00	0.00	
(b) Other Federal Ope				
•		170.15	14029.46	
(c) Total Operating Ex	kpenditures i), and (b))▶	170.15	14029.46	
2. Transfers to Affiliated/C		, , , , , ,		
Committees		0.00	0.00	
Federal Candidates/Co and Other Political Cor	mmittees nmittees	0.00	0.00	
4. Independent Expenditu		4 4	4 4 4	
(use Schedule E) 5. Coordinated Party Exp	enditures 📙	11444.65	134856.29	
(52 U.S.C. § 30116(d)) (use Schedule F)		0.00	0.00	
6. Loan Repayments Mac	10	0.00	000	
o. Loan nepayments mac		0.00	0.00	
7. Loans Made 8. Refunds of Contribution		0.00	0.00	
(a) Individuals/Person:		0.00	0.00	
		0.00	0.00	
	nmittees	0.00	0.00	
(c) Other Political Cor (such as PACs)		0.00	0.00	
(d) Total Contribution	Refunds			
(add Lines 28(a),	(b), and (c))	0.00	0.00	
9. Other Disbursements (	Including			
Non-Federal Donations	)	0.00	0.00	
D. Federal Election Activit	y (52 U.S.C. § 30101(20)	)		
(a) Allocated Federal	Election Activity	,		
(from Schedule He				
(I) Federal Share.		0.00	0.00	
		0.00	0.00	
(b) Federal Election A	activity Paid eral Funds		7 7 7 7	
(c) Total Federal Elec		0.00	0.00	
	a)(ii) and 30(b))	0.00	0.00	
1. Total Disbursements (a	add Linos 21(a) 22		,	
23, 24, 25, 26, 27, 28	1 1	11614.80	148885.75	
		11014.00	140003.73	
<ol><li>Total Federal Disburse (subtract Line 21(a)(ii)</li></ol>				
		11614.80	148885.75	

34. Total Contribution Refunds

38. Net Operating Expenditures

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016) III. Net Contributions/

Page 5 **COLUMN A** COLUMN B **Total This Period** Calendar Year-to-Date **Operating Expenditures** 33. Total Contributions (other than loans) 140.00 148051.00 (from Line 11(d), page 3) ..... 0.00 0.00 (from Line 28(d))..... 35. Net Contributions (other than loans) 148051.00 140.00 (subtract Line 34 from Line 33) ..... 36. Total Federal Operating Expenditures 170.15 14029.46 (add Line 21(a)(i) and Line 21(b)) .......▶ 37. Offsets to Operating Expenditures 0.00 0.00 (from Line 15, page 3)..... 170.15 14029.46 (subtract Line 37 from Line 36) ......

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 6 OF 35 (check only one)				
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	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) COURAGEOUS CONSERVATIVES	, ,		22.1.1.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.			
Full Name (Last, First, Middle Initial)  A. C&H Financial Services			Date of Disbursement			
Mailing Address 1 Westbrook Corporate Center Ste 300	1		09 04 2018			
Westchester	State Zip Code IL 60154		FEC Identification Number			
Purpose of Disbursement Bank Card Fees Candidate Name			C C00587022  Transaction ID : SB21B.5377			
COURAGEOUS CONSERVATIVES	S PAC	Category/ Type	Amount of Each Disbursement this Period 50.85			
Senate President	Primary  General  Other (specify)		Memo Item			
State: District: Full Name (Last, First, Middle Initial)						
B. C&H Financial Services			Date of Disbursement			
Mailing Address 1 Westbrook Corporate Center Ste 300			09 07 2018			
Westchester	State Zip Code IL 60154		FEC Identification Number			
Purpose of Disbursement Back Card Fees Candidate Name			C C00587022 Transaction ID : SB21B.5382			
COURAGEOUS CONSERVATIVES		Category/ Type	Amount of Each Disbursement this Period			
Senate	nent For: 2018 Primary		20.00			
State: District:	Other (specify)		Memo Item			
Full Name (Last, First, Middle Initial)  C. Wells Fargo			Date of Disbursement			
Mailing Address Rt. 70			09 05 2018			
,	State Zip Code NJ 08055		FEC Identification Number  C C00587022			
Candidate Name COURAGEOUS CONSERVATIVE	S PAC	Category/ Type	Transaction ID: SB21B.5379  Amount of Each Disbursement this Period			
Office Sought: House Disbursem	nent For: 2018 Primary		31.00 Memo Item			
SUBTOTAL of Disbursements This Page (optional)			101.85			
TOTAL This Period (last page this line number only)			4 4			

#### S 17

SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 7 OF					GE 7 OF 35
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	1 · —	k only		23	26	
	Detailed Summary Page		<u>  x</u>	21b 28a	22 28b	27 30b		
Any information conied from such Borouts and Otston						28c	29	
Any information copied from such Reports and Statem or for commercial purposes, other than using the name								
NAME OF COMMITTEE (In Full)								
$ \; angle$ COURAGEOUS CONSERVATIVE:	S PAC							
Full Name (Last, First, Middle Initial)								
A. Wells Fargo					Date of	Disburs	ement	
					M M			0010
Mailing Address Rt. 70					09		05	2018
,	State	Zip Code			FEC Id	entificatio	n Number	
Medford Purpose of Disbursement	NJ	08055						
Wire Fee						C005870		
Candidate Name			Categor	24/			n ID : SB21 Dishursan	B.5380 nent this Period
COURAGEOUS CONSERVATIVES	SPAC		Type	y/	Amount	OI Laci	Disbuisen	ient tills i enou
Office Sought: House Disbursen	nent For: 2018  Primary  General  Other (specify)				30.00			
State: President District:	Otner (spec	iiiy) 🔻			Me	mo Item		
Full Name (Last, First, Middle Initial)								
B.					Date of	Disburs	ement	
					M M / D D / Y Y Y Y			
Mailing Address	valling Address							
City	State	Zip Code			FEC Ide	entificatio	n Number	
Purpose of Disbursement								
Turpose of Disbursement					C			
Candidate Name			Categor	v/	Amount	of Fach	Disbursen	nent this Period
			Type	<i>y</i> ,	-	0. 200.	2.020.00	
Office Sought: House Disbursem						-		
	Primary Other (spec	General			_			
State: District:	Other (spec	iiy)			Me	mo Item		
Full Name (Last, First, Middle Initial)								
C.					Date of	Disburs	ement	
Mailing Address					M M	/ D	D / Y	YYYY
City	State	Zip Code			FEC Id	entificatio	n Number	
Purpose of Disbursement					С		-	
Candidate Name		'	Categor	ry/	Amount	of Each	Disbursen	nent this Period
Office Sought: House Disbursen	ent For		Type					
	Primary	General				-	7	
	Other (spec	:ify) ▼			Me	mo Item		
State: District:	·				Ivie	nio item		
								30.00
SUBTOTAL of Disbursements This Page (optional)				_	1	-		30.00
TOTAL This Period (last page this line number only)					1			131.85

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

PAGE 8 OF 35

		Detailed Sulfilliary Page FOR LINE 13 OF FORM 3X
AME OF COMMITTEE (In Full)	/EC DAC	Transaction ID : SC/10.4280
COURAGEOUS CONSERVATI\	/ES PAC	
LOAN SOURCE Full Name (Last, First, Ekstrom, Christopher, , ,	Middle Initial)	N
Mailing Address 25 Highland Park Village		Other (specify) ▼
Suite 100		
City	State	ZIP Code
Dallas	TX	75205
Original Amount of Loan	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period
12000.00		0.00 12000.00
TERMS  Date Incurred	D	ate Due Interest Rate Secured:
M 10	M = M / D = D	0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any	) to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
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		
Maining / taa. eee		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 (option  TOTALS This Period (last page in this line of		12000.00
Carry outstanging palance only to LINE 3.	scnequie D. for this	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

PAGE 9 OF 35

		Detailed Sulfilliary Page FOR LINE 13 OF FORM 3X
IAME OF COMMITTEE (In Full) COURAGEOUS CONSERVATIVE	S PAC	Transaction ID : SC/10.4281
LOAN SOURCE Full Name (Last, First, Mi Ekstrom, Christopher, , ,	ddle Initial)	Memo Item Election: Primary General
Mailing Address 25 Highland Park Village		Other (specify) ▼
Suite 100		
City	State	ZIP Code
Dallas	TX	75205
Original Amount of Loan	Cumulative Pay	nent To Date Balance Outstanding at Close of This Period
15000.00		0.00 15000.00
TERMS Date Incurred	Di	te Due Interest Rate Secured:
M 11 M / D 05 D / Y 2015	M M / D D	/
List All Endorsers or Guarantors (if any) t	o Loan Source	
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)  TOTALS This Period (last page in this line onl		1300.00
		line. If no Schedule D, carry forward to appropriate line of Summary.

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

PAGE 10 OF 35

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full) Transaction ID: SC/10.4283 **COURAGEOUS CONSERVATIVES PAC** Election: **LOAN SOURCE** Full Name (Last, First, Middle Initial) Ekstrom, Christopher, , , Memo Item Primary General Mailing Address 25 Highland Park Village Other (specify) ▼ Suite 100 City State ZIP Code Dallas 75205 TX Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 30000.00 30000.00 0.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 17<sup>D</sup> 11 2015 X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Occupation Mailing Address 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 ZIP Code City State Amount Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City ZIP Code State Amount Guaranteed Outstanding: SUBTOTALS This Period This Page (optional)..... 30000.00 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.

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

PAGE 11 OF 35

FOR LINE 13 OF FORM 3X

		TOTALINE TO OT TOTALINE
NAME OF COMMITTEE (In Full) COURAGEOUS CONSERVATIV	ES PAC	Transaction ID : SC/10.4404
LOAN SOURCE Full Name (Last, First, Ekstrom, Christopher, , ,	Middle Initial)	N ☐ Memo Item
Mailing Address 25 Highland Park Village Suite 100		Other (specify) ▼
City	State	ZIP Code
Dallas	TX	75205
Original Amount of Loan	Cumulative Pay	ment To Date  Balance Outstanding at Close of This Period
6500.00		0.00 6500.00
TERMS  Date Incurred	D	ate Due Interest Rate Secured:
M 01 M / D 05 D / Y 2016 Y	M   M / D   D	/ 11/8/16 0.00 % (apr) Yes ✗ No
List All Endorsers or Guarantors (if any	to Loan Source	IN 15
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	ıl)	6500.00
TOTALS This Period (last page in this line of	nly)	
Carry outstanding halance only to LINE 3.5	Schedule D for this	s line If no Schedule D. carry forward to appropriate line of Summary

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

PAGE 12 OF 35

FOR LINE 13 OF FORM 3X

AME OF COMMITTEE (In Full) COURAGEOUS CONSER	VATIVE	S PAC	Transaction ID : SC/10.4405
LOAN SOURCE Full Name (Las Ekstrom, Christopher, , ,	st, First, M	iddle Initial)	N
Mailing Address 25 Highland Park Suite 100	Village		Other (specify) ▼
City		State	ZIP Code
Dallas		TX	75205
Original Amount of Loan	00.00	Cumulative Pay	ment To Date  Balance Outstanding at Close of This Period  0.00  20000.00
Date Incurred  MO1		M = M / D = D	ate Due Interest Rate Secured:  0.00 % (apr) Yes No
List All Endorsers or Guarantor  1. Full Name (Last, First, Middle		to Loan Source	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  FOTALS This Period (last page in the	his line on	ly)	
Carry outstanding balance only to	LINE 3, Sc	hedule D, for this	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

PAGE 13 OF 35

		Detailed Sufficially Page FOR LINE 13 OF FORM 3X
IAME OF COMMITTEE (IN FUII) COURAGEOUS CONSERVATIVE	ES PAC	Transaction ID : SC/10.4406
LOAN SOURCE Full Name (Last, First, M Ekstrom, Christopher, , ,	liddle Initial)	N ☐ Memo Item
Mailing Address 25 Highland Park Village		Other (specify) ▼
Suite 100	Otata	7ID Oada
City	State	ZIP Code
Original Amount of Loan	Cumulative Pay	
8000.00	Cumulative Fay	0.00 Balance Odistanding at close of This Feriod
TERMS	D	nto Duo Interest Data Conurado
Date Incurred  Mo1 / D25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	M = M / D = D	ate Due Interest Rate Secured:    Y 1 1/8/16   0.00   % (apr)   Yes   X No
List All Endorsers or Guarantors (if any)	to Loan Source	
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)  TOTALS This Period (last page in this line on		, , , , , , , , , , , , , , , , , , , ,
		line. If no Schedule D, carry forward to appropriate line of Summary.
Carry Outstanding Datable UNIV to LINE 3. 30	medule D. (Of this	inie, ii no ocheuule d. carry lorwaru to appropriate iine of oummary.

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

PAGE 14 OF 35

				Detailed Sulfill	iary rage	FOR LINE	13 OF FURIN 3X
AME OF COMMITTEE (In Full) COURAGEOUS CONSEF	?\/ATI\/F	S PAC			Trans	action ID : SC/10.4	1500
	\						
LOAN SOURCE Full Name (La Ekstrom, Christopher, , ,	ast, First, M	iddle Initial)		<b>N</b> ☐ Me	emo Item	Election: Primary	
Mailing Address 25 Highland Par	k Village					General Other (specify	y) ▼
Suite 100	K Village						,
City		State	ZIP Cod	le			
Dallas		TX	75205	5			
Original Amount of Loan		Cumulative Pay	yment To I	Date	Balan	nce Outstanding at	Close of This Period
8	500.00	7		0.00	] [.	7	8500.00
TERMS		5	ata Dua	linka	wast Data		Casuradi
Date Incurred  M 02 / D 03 / Y 20	16	M = M / D = D	Pate Due	Y Y Y Y	0.00	% (apr)	Secured:  Yes No
List All Endorsers or Guaranto	rs (if any)	to Loan Source					
1. Full Name (Last, First, Middle				Name of Employ	ver		
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:		7 1 1 7	75.
2. Full Name (Last, First, Middle	Initial)			Name of Employ	er er		
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:		7 7	
3. Full Name (Last, First, Middle	nitial)			Name of Employ	er er		
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:		7	
4. Full Name (Last, First, Middle	Initial)			Name of Employ	er er		
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:		T	1 4 1
SUBTOTALS This Period This Pag	e (optional)			·····		7	8500.00
TOTALS This Period (last page in	this line on	ly)		······································			
Carry outstanding balance only to	LINE 3. Sc	hedule D. for this	s line. If r	o Schedule D. o	arry forwa	ard to appropriate	line of Summary.

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

PAGE 15 OF 35

FOR LINE 13 OF FORM 3X

		Potanou duminary rago   Port Elive 15 of Portivi 5X			
IAME OF COMMITTEE (IN FUII) COURAGEOUS CONSERVATIV	ES PAC	Transaction ID: SC/10.4505			
LOAN SOURCE Full Name (Last, First, MEkstrom, Christopher, , ,	Middle Initial)	N ☐ Memo Item			
Mailing Address 25 Highland Park Village Suite 100		Other (specify) ▼			
City	State	ZIP Code			
Dallas	TX	75205			
Original Amount of Loan	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period			
30000.00	1 1 4	0.00 30000.00			
TERMS  Date Incurred	D	ate Due Interest Rate Secured:			
M 02 M / D 12 D / Y Y Y 16 Y	M = M / D = D	0.00 % (apr) Yes X 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)	<u>'</u>	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 (optiona	SUBTOTALS This Period This Page (optional)				
TOTALS This Period (last page in this line only)					
Carry outstanding balance only to LINE 3 S	chedule D for this	s line If no Schedule D. carry forward to appropriate line of Summary			

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

PAGE 16 OF 35

		Detailed Sulfillary Page FOR LINE 13 OF FORM 3X			
IAME OF COMMITTEE (IN FUII) COURAGEOUS CONSERVATIVE	S PAC	Transaction ID : SC/10.4510			
LOAN SOURCE Full Name (Last, First, M Ekstrom, Christopher, , ,	iddle Initial)	N ☐ Memo Item			
Mailing Address 25 Highland Park Village	Mailing Address 25 Highland Park Village				
Suite 100					
City	State	ZIP Code			
Dallas	TX	75205			
Original Amount of Loan	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period			
17000.00	7	0.00 17000.00			
TERMS  Date Incurred	D	te Due Interest Rate Secured:			
M 02 M / D 22 D / Y 2016	M = M / D = D	0.00 % (apr) Yes X No			
List All Endorsers or Guarantors (if any)	to Loan Source				
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)					
TOTALS This Period (last page in this line on		line. If no Schedule D, carry forward to appropriate line of Summary.			

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

PAGE 17 OF 35

		Detailed Sulfillary Page FOR LINE 13 OF FORM 3X		
IAME OF COMMITTEE (IN FUII) COURAGEOUS CONSERVATIVE	S PAC	Transaction ID : SC/10.4555		
LOAN SOURCE Full Name (Last, First, M Ekstrom, Christopher, , ,	iddle Initial)	N ☐ Memo Item		
Mailing Address 25 Highland Park Village		Other (specify) ▼		
Suite 100				
City	State	ZIP Code		
Dallas	TX	75205		
Original Amount of Loan	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period		
10000.00	7	0.00		
TERMS  Date Incurred	D	ate Due Interest Rate Secured:		
M 03 M / D 18 D / Y 2016 Y	M = M / D = D	% (apr) Yes X No		
List All Endorsers or Guarantors (if any)	to Loan Source			
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)				
		line. If no Schedule D, carry forward to appropriate line of Summary.		

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

PAGE 18 OF 35

		Detailed Sufficially Page FOR LINE 13 OF FORM 3X
IAME OF COMMITTEE (IN FUII) COURAGEOUS CONSERVATIVE	ES PAC	Transaction ID: SC/10.4892
LOAN SOURCE Full Name (Last, First, M Ekstrom, Christopher, , ,	liddle Initial)	N ☐ Memo Item
Mailing Address 25 Highland Park Village		Other (specify) ▼
Suite 100		
City	State	ZIP Code
Dallas	TX	75205
Original Amount of Loan	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period
4567.89		0.00 4567.89
TERMS Date Incurred	D	ate Due Interest Rate Secured:
M 07	M   M / D   D	0.00 % (apr) Yes X 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	ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City	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)		, 4007.03
TOTALS This Period (last page in this line on		line. If no Schedule D, carry forward to appropriate line of Summary.
Carry outstanding palance only to LINE 3. 50	neaule D. for this	Time. II NO Schedule D. Carry Torward to appropriate line of Summary.

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

PAGE 19 OF 35

		Detailed Sulfillary Page FOR LINE 13 OF FORM 3X		
IAME OF COMMITTEE (In Full) COURAGEOUS CONSERVATIVE	S PAC	Transaction ID : SC/10.4891		
LOAN SOURCE Full Name (Last, First, M Ekstrom, Christopher, , ,	iddle Initial)	N ☐ Memo Item Election: ☐ Primary ☐ General		
Mailing Address 25 Highland Park Village		Other (specify) ▼		
Suite 100				
City	State	ZIP Code		
Dallas	TX	75205		
Original Amount of Loan	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period		
6000.00	7	0.00 6000.00		
TERMS  Date Incurred	D	ate Due Interest Rate Secured:		
M 07 M / D 11 D / Y 2016 Y	M = M / D = D	0.00 % (apr) Yes X No		
List All Endorsers or Guarantors (if any)	to Loan Source			
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)				
		line. If no Schedule D, carry forward to appropriate line of Summary.		

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

PAGE 20 OF 35

		Detailed Summary Fage FOR LINE 13 OF FORM 3X		
IAME OF COMMITTEE (In Full) COURAGEOUS CONSERVATIV	ES PAC	Transaction ID : SC/10.4918		
LOAN SOURCE Full Name (Last, First, MEkstrom, Christopher, , ,	N			
Mailing Address 25 Highland Park Village		Other (specify) ▼		
Suite 100				
City	State	ZIP Code		
Dallas	TX	75205		
Original Amount of Loan	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period		
10013.46		0.00 10013.46		
TERMS  Date Incurred	D	ate Due Interest Rate Secured:		
M 08	M = M / D = D	/ 12/31/2020		
List All Endorsers or Guarantors (if any)	to Loan Source			
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)				
TOTALS This Period (last page in this line or		s line. If no Schedule D, carry forward to appropriate line of Summary.		
Carry Outstanding Datable UNIV to LINE 3. 5	CHEQUIE D. TOT TAIS	o mie. ii no ocheuule d. carry lorwaru to appropriate line of oummary.		

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

PAGE 21 OF 35

		Detailed Sulfillary Page FOR LINE 13 OF FORM 3X		
IAME OF COMMITTEE (In Full) COURAGEOUS CONSERVATIVE	S PAC	Transaction ID: SC/10.4934		
LOAN SOURCE Full Name (Last, First, Mi Ekstrom, Christopher, , ,	N			
Mailing Address 25 Highland Park Village	Other (specify) ▼			
Suite 100				
City	State	ZIP Code		
Dallas	TX	75205		
Original Amount of Loan	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period		
9500.00		0.00 9500.00		
TERMS Date Incurred	Da	ate Due Interest Rate Secured:		
M 09 / 19 / Y 2016	M   M / D   D	12/31/2020 0.00 % (apr) Yes X No		
List All Endorsers or Guarantors (if any) t	to Loan Source			
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)				
TOTALS This Period (last page in this line onl				
Carry outstanding balance only to LINE 3. Sci	nedule D. for this	line. If no Schedule D, carry forward to appropriate line of Summary.		

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

PAGE 22 OF 35

FOR LINE 13 OF FORM 3X

AME OF COMMITTEE (In Full) COURAGEOUS CONSERVA	TIVES	S PAC		Т	ransaction ID : SC/10.4948	
LOAN SOURCE Full Name (Last, First, Middle Initial) Ekstrom, Christopher, , ,				N	Election: Primary General	
Mailing Address 25 Highland Park Village Suite 100					Other (specify) ▼	
City		State	ZIP Cod	е		
Dallas		TX	75205	i		
Original Amount of Loan		Cumulative Pay	ment To D	Date E	Balance Outstanding at Close of This Period	
15420.00	0			0.00	15420.00	
TERMS  Date Incurred		Da	ate Due	Interest F	Rate Secured:	
M 11 / 16 / Y 2016	Y	/ D D	12/	31/2020 C	0.00 % (apr) Yes X No	
List All Endorsers or Guarantors (if	any) to	Loan Source				
1. Full Name (Last, First, Middle Initia	al)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	171171171	
2. Full Name (Last, First, Middle Initia	2. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	e ZIP Code		Amount Guaranteed Outstanding:		
3. Full Name (Last, First, Middle Initia	al)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
4. Full Name (Last, First, Middle Initia	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 (op					15420.00	
OTALS This Period (last page in this li					forward to appropriate line of Summary.	

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

PAGE 23 OF 35

				Detailed Suffil	illaly Fage	FOR LINE	13 OF FURM 3X
AME OF COMMITTEE (In Full)  COURAGEOUS CONSERVATIVES PAC					4995		
	\	.0170					
LOAN SOURCE Full Name (Last, First, Middle Initial) Ekstrom, Christopher, , ,				<b>N</b> _ M	emo Item	Election: Primary General	
Mailing Address 25 Highland Par	k Village					Other (specify	<b>√</b> ) ▼
Suite 100							
City		State	ZIP Code	)			
Dallas		TX	75205				
Original Amount of Loan		Cumulative Pay	yment To D	ate	Balan	nce Outstanding at	Close of This Period
12	500.00	7	7	0.00		7	12500.00
TERMS  Date Incurred		D	ate Due	Int	terest Rate		Secured:
M M / D D / Y Y	M M / D D / Y Y Y Y M M / D D / Y			1/2021	0.00	<b>%</b> (apr)	Yes X No
List All Endorsers or Guaranto	rs (if any)	to Loan Source					
1. Full Name (Last, First, Middle	Initial)		1	Name of Emplo	yer		
Mailing Address			(	Occupation			
City	State	ZIP Code	(	Amount Guaranteed Outstanding:		7 1 1 7	
2. Full Name (Last, First, Middle Initial)			ı	Name of Emplo	yer		
Mailing Address			(	Occupation			
City	State	ZIP Code	(	Amount Guaranteed Outstanding:		7 1 7	
3. Full Name (Last, First, Middle	Initial)		1	Name of Emplo	yer		
Mailing Address			(	Occupation			
City	State	ZIP Code	(	Amount Guaranteed Outstanding:		7 1 1 7	
4. Full Name (Last, First, Middle Initial)			1	Name of Emplo	yer		
Mailing Address			(	Occupation			
City	State	ZIP Code	(	Amount Guaranteed Outstanding:		7	
SUBTOTALS This Period This Pag	e (optional)			·····•		7	12500.00
TOTALS This Period (last page in	this line on	y)		······································			,
Carry outstanding balance only to	LINE 3. Sc	hedule D. for this	s line. If no	Schedule D.	carry forwa	ard to appropriate	e line of Summarv.

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

PAGE 24 OF 35

FOR LINE 13 OF FORM 3X

AME OF COMMITTEE (In Full)		S PAC	Transaction ID : SC/10.4996
LOAN SOURCE Full Name Ekstrom, Christopher, , ,	(Last, First, M	iddle Initial)	N ☐ Memo Item
Mailing Address 25 Highland Park Village Suite 100			General Other (specify) ▼
City		State	ZIP Code
Dallas		TX	75205
Original Amount of Loan	300.00	Cumulative Pa	ayment To Date  Balance Outstanding at Close of This Period  0.00  300.00
TERMS  Date Incurred  M 08 / 31 / Y	ž017 <sup>Y</sup>	M M / D L	12/31/2021 0.00 % (apr) Yes X No
List All Endorsers or Guara  1. Full Name (Last, First, Mid	, ,,,	to Loan Source	Name of Employer
Mailing Address	·		Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Mic	ddle Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Mic	ddle Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Mic	ddle Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This  OTALS This Period (last page			
Carry outstanding balance only	y to LINE 3, Sc	hedule D, for thi	is line. If no Schedule D, carry forward to appropriate line of Summary.

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

PAGE 25 OF 35

		Detailed Summary Fage FOR LINE 13 OF FORM 3X		
IAME OF COMMITTEE (IN FUII) COURAGEOUS CONSERVATIVI	ES PAC	Transaction ID: SC/10.5028		
LOAN SOURCE Full Name (Last, First, MEkstrom, Christopher, , ,	N			
Mailing Address 25 Highland Park Village		Other (specify) ▼		
Suite 100				
City	State	ZIP Code		
Dallas	TX	75205		
Original Amount of Loan	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period		
5014.97		0.00 5014.97		
TERMS Date Incurred	D	ate Due Interest Rate Secured:		
M 09 / 01 D / Y Y Y Y Y	M = M / D = D	/ 12/31/2017 0.00 Yes <b>x</b> No		
List All Endorsers or Guarantors (if any)	to Loan Source			
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)				
TOTALS This Period (last page in this line or				
Carry outstanging palance only to LINE 3. So	cneaule D. for this	line. If no Schedule D, carry forward to appropriate line of Summary.		

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

PAGE 26 OF 35

FOR LINE 13 OF FORM 3X

		TOTALINE TO TOTAL TO OF TOTAL ON			
NAME OF COMMITTEE (IN FUII) COURAGEOUS CONSERVATIV	'ES PAC	Transaction ID : SC/10.5068			
LOAN SOURCE Full Name (Last, First, Ekstrom, Christopher, , ,	Middle Initial)	N			
Mailing Address 25 Highland Park Village Suite 100		Other (specify) ▼			
City	State	ZIP Code			
Dallas	TX	75205			
Original Amount of Loan	Cumulative Page	yment To Date Balance Outstanding at Close of This Period			
11000.00		0.00 11000.00			
TERMS  Date Incurred	D	ate Due Interest Rate Secured:			
M 10	M M / D D	/ 12/31/2021 0.00 % (apr) Yes ✗ No			
List All Endorsers or Guarantors (if any	) to Loan Source				
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 (options	SUBTOTALS This Period This Page (optional)				
**TOTALS This Period (last page in this line only)					
Carry outstanding balance only to LINE 3	Schedule D. for this	s line. If no Schedule D. carry forward to appropriate line of Summary			

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

PAGE 27 OF 35

FOR LINE 13 OF FORM 3X

AME OF COMMITTEE (In Full) COURAGEOUS CONSE	RVATIVE	ES PAC	Transaction ID : SC/10.5091
LOAN SOURCE Full Name (La Ekstrom, Christopher, , ,	N		
Mailing Address 25 Highland Park Village Suite 100			Other (specify) ▼
City		State	ZIP Code
Dallas		TX	75205
Original Amount of Loan	750.00	Cumulative Pay	ment To Date  Balance Outstanding at Close of This Period  0.00  750.00
	17 Y	M M / D D	ate Due Interest Rate Secured:  12/31/2022 0.00 % (apr) Yes X No
List All Endorsers or Guaranto  1. Full Name (Last, First, Middle		to Loan Source	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	e Initial)		Name of Employer
Mailing Address			Occupation
City State ZIP Code		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 Pag			730.00
Carry outstanding balance only to	LINE 3, Sc	hedule D, for this	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

PAGE 28 OF 35

FOR LINE 13 OF FORM 3X

AME OF COMMITTEE (In Full) COURAGEOUS CONSERV	'ATIVE	S PAC	Transaction ID : SC/10.5104
LOAN SOURCE Full Name (Last, Ekstrom, Christopher, , ,	N  ☐ Memo Item		
Mailing Address 25 Highland Park Village Suite 100			Other (specify) ▼
City		State	ZIP Code
Dallas		TX	75205
Original Amount of Loan	5.00	Cumulative Pay	ment To Date  Balance Outstanding at Close of This Period  0.00  22185.00
TERMS			
Date Incurred  M 12 / D1 / Y 2017	Y	D   D   D	ate Due Interest Rate Secured:  1
List All Endorsers or Guarantors	(if any)	to Loan Source	
1. Full Name (Last, First, Middle In	itial)		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 In	itial)		Name of Employer
Mailing Address			Occupation
City State ZIP Code		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 (			, 22103.00
Carry outstanding balance only to LL	NE 3. Sc	hedule D. for this	line. If no Schedule D, carry forward to appropriate line of Summary.

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

PAGE 29 OF 35

FOR LINE 13 OF FORM 3X

		TOTAL TO OF TOTAL ON
IAME OF COMMITTEE (In Full) COURAGEOUS CONSERVATI	Transaction ID: SC/10.5102	
LOAN SOURCE Full Name (Last, First, Ekstrom, Christopher, , ,	Middle Initial)	N
Mailing Address 25 Highland Park Village Suite 100		Other (specify) ▼
City	State	ZIP Code
Dallas	TX	75205
Original Amount of Loan	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period
5000.00		0.00 5000.00
TERMS Date Incurred	D	ate Due Interest Rate Secured:
M 12	M = M / D = D	/ 12/31/2021 0.00
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 (option:	al)	5000.00
TOTALS This Period (last page in this line of	only)	
Carry outstanding balance only to LINE 3	Schedule D. for this	s line If no Schedule D. carry forward to appropriate line of Summary

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

PAGE 30 OF 35

TERMS  Date Incurred  Date Due  Interest Rate  Secured:  12		Detailed Sulfilliary Page FOR LINE 13 OF FORM 3X
Ekstrom, Christopher,  Mailing Address 25 Highland Park Village Suite 100  City Dallas TX 75205  Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This I  6500.00  TERMS Date Incurred Date Due Interest Rate Secured: 12" 10" 18" 12" 2017 12" 12" 12" 2017 12" 12" 2017 12" 12" 2017 12" 12" 2017 12" 2		Transaction ID : SC/10.5103
Suite 100  City  Dallas  TX  75205  Original Amount of Loan  Cumulative Payment To Date  Balance Outstanding at Close of This I  6500.00  TERMS  Date Incurred  Date Due  Interest Rate  Secured:  12	RCE Full Name (Last, First, Middle Initial) stopher, , ,	Primary
City Dallas TX 75205  Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This I  ERMS Date Incurred Date Due Interest Rate Secured: 12	ess 25 Highland Park Village	Other (specify) ▼
Dallas  TX 75205  Original Amount of Loan  Cumulative Payment To Date  Balance Outstanding at Close of This I  0.00  TERMS  Date Incurred  Date Due  Interest Rate  Secured:  12	Suite 100	
Original Amount of Loan  Cumulative Payment To Date  Balance Outstanding at Close of This is 6500.00  TERMS  Date Incurred  Date Due  Interest Rate  Secured:  1. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  City  State  ZIP Code  Amount Guaranteed Outstanding:  City  State  ZIP Code  Amount Guaranteed Outstanding:  City  State  ZIP Code  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:  City  State  ZIP Code  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:  City  State  ZIP Code  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:  Amount Guaranteed  City  State  ZIP Code  Amount Guaranteed  Amount Guaranteed  City  State  ZIP Code  Amount Guaranteed	State	ZIP Code
TERMS  Date Incurred  Date Due  Interest Rate  Secured:  12	TX	75205
TERMS  Date Incurred  Date Due  Interest Rate  Secured:  M12	ount of Loan Cumulative F	nent To Date Balance Outstanding at Close of This Period
Date Incurred  Date Due Interest Rate  Secured:  12	6500.00	0.00 6500.00
List All Endorsers or Guarantors (if any) to Loan Source  1. Full Name (Last, First, Middle Initial)  Mailing Address  City  State  ZIP Code  Amount Guaranteed Outstanding:  2. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  City  State  ZIP Code  Amount Guaranteed Outstanding:  City  State  ZIP Code  Amount Guaranteed Outstanding:  Name of Employer  Mailing Address  Occupation  City  State  ZIP Code  Amount Guaranteed Outstanding:  Name of Employer  Mailing Address  Occupation  City  State  ZIP Code  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:  City  State  ZIP Code  Amount Guaranteed  Amount Guaranteed	Date Incurred	te Due Interest Rate Secured:
1. Full Name (Last, First, Middle Initial)  Mailing Address  City  State  ZIP Code  Amount Guaranteed Outstanding:  2. Full Name (Last, First, Middle Initial)  Mailing Address  City  State  ZIP Code  Amount Guaranteed Outstanding:  Name of Employer  Name of Employer  Name of Employer  Mailing Address  Occupation  3. Full Name (Last, First, Middle Initial)  Name of Employer  Amount Guaranteed Outstanding:  Name of Employer  Name of Employer  Name of Employer  Mailing Address  Occupation		/ 12/31/2021
Mailing Address  City  State  ZIP Code  Amount Guaranteed Outstanding:  2. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  City  State  ZIP Code  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:  3. Full Name (Last, First, Middle Initial)  Name of Employer  Mailing Address  Occupation  Name of Employer  Mailing Address  Occupation  City  State  ZIP Code  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:	orsers or Guarantors (if any) to Loan Source	
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:  Mailing Address Occupation  City State ZIP Code Amount Guaranteed	(Last, First, Middle Initial)	Name of Employer
Guaranteed Outstanding:  2. Full Name (Last, First, Middle Initial)  Name of Employer  Occupation  City  State  ZIP Code  Amount Guaranteed Outstanding:  3. Full Name (Last, First, Middle Initial)  Name of Employer  Name of Employer  Occupation  Occupation  Occupation  Name of Employer  Amount Guaranteed Outstanding:  Amount Guaranteed	dress	Occupation
Mailing Address  City  State  ZIP Code  Amount Guaranteed Outstanding:  Name of Employer  Mailing Address  Occupation  City  State  ZIP Code  Amount Guaranteed Outstanding:  Name of Employer  Amount Guaranteed	State ZIP Code	Guaranteed
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	(Last, First, Middle Initial)	Name of Employer
Guaranteed Outstanding:  3. Full Name (Last, First, Middle Initial)  Name of Employer  Mailing Address  Occupation  City  State  ZIP Code  Amount Guaranteed	dress	Occupation
Mailing Address  Occupation  City  State ZIP Code Amount Guaranteed	State ZIP Code	Guaranteed
City State ZIP Code Amount Guaranteed	(Last, First, Middle Initial)	Name of Employer
Guaranteed	dress	Occupation
Outstanding:	State ZIP Code	
4. Full Name (Last, First, Middle Initial)  Name of Employer	(Last, First, Middle Initial)	Name of Employer
Mailing Address Occupation	dress	Occupation
City State ZIP Code Amount Guaranteed Outstanding:	State ZIP Code	Guaranteed
SUBTOTALS This Period This Page (optional)		
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 Sumn		

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

PAGE 31 OF 35

			Detailed Summary Page FOR LINE 13 OF FORM 3X		
AME OF COMMITTEE (In Full)			Transaction ID : SC/10.5146		
COURAGEOUS CONSERVATIVES PAC					
LOAN SOURCE Full Name (I	LOAN SOURCE Full Name (Last, First, Middle Initial)  N				
Ekstrom, Christopher, , ,		iddic illital)	Primary		
			General		
Mailing Address 25 Highland Pa	rk Village		U Other (specify) ▼		
Suite 100					
City		State	ZIP Code		
Dallas		TX	75205		
Original Amount of Loan		Cumulative Pay	ment To Date Balance Outstanding at Close of This Period		
7 7	500.00	7	0.00 500.00		
TERMS		5	ata Dua - Interest Data - Casuradi		
Date Incurred	YY	M M / D D	ate Due Interest Rate Secured:		
04 14 20	)18		12/31/2025 0.00 % (apr) Yes X No		
List All Endorsers or Guarante	ors (if any)	to Loan Source			
Full Name (Last, First, Middle 1)	, ,,	Louis Cource	Name of Employer		
(230, 7 110, 71110					
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		
Than of Employs.					
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 Pa	ge (optional)		500.00		
300.00					
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.					

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

PAGE 32 OF 35

		Detailed Sulfillary Page   FOR LINE 13 OF FORM 3X			
IAME OF COMMITTEE (In Full) COURAGEOUS CONSERVATIVE	Transaction ID : SC/10.5187				
LOAN SOURCE Full Name (Last, First, Mi Ekstrom, Christopher, , ,	N ☐ Memo Item				
Mailing Address 25 Highland Park Village		Other (specify) ▼			
Suite 100	0.1-1-	7/0.0.4			
City	State	ZIP Code			
Dallas Original Amount of Loop	TX Cumulativa Pay	75205  Polance Outstanding at Class of This Period			
Original Amount of Loan 22000.00	Cumulative Pay	ment To Date  Balance Outstanding at Close of This Period  0.00  22000.00			
TERMS Date Incurred	D	ata Dua Interest Pata Secured			
Date Incurred  M 05	M = M / D = D	Interest Rate    Y   12/31/2022   0.00   % (apr)   Yes   No			
List All Endorsers or Guarantors (if any)	to Loan Source				
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)					
TOTALS This Period (last page in this line onl					
Carry outstanding balance only to LINE 3. Sc	nedule D. tor this	line. If no Schedule D, carry forward to appropriate line of Summary.			

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

PAGE 33 OF 35

FOR LINE 13 OF FORM 3X

		Potanica cammary rago   Torr Elive 15 of Torrior 5X
IAME OF COMMITTEE (In Full) COURAGEOUS CONSERVATIV	Transaction ID : SC/10.5243	
LOAN SOURCE Full Name (Last, First, Ekstrom, Christopher, , ,	Middle Initial)	N
Mailing Address 25 Highland Park Village Suite 100		Other (specify) ▼
City	State	ZIP Code
Dallas	TX	75205
Original Amount of Loan	Cumulative Pag	yment To Date Balance Outstanding at Close of This Period
6000.00		0.00 6000.00
TERMS Date Incurred	С	pate Due Interest Rate Secured:
M 06 / D 08 / Y 2018 Y	M M / D D	/ 12/31/2020
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 (option	al)	6000.00
TOTALS This Period (last page in this line	only)	
Carry outstanding balance only to LINE 3	Schedule D. for this	s line. If no Schedule D. carry forward to appropriate line of Summary

Signature

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

TEMIZED INDEPENDENT EXPENDITURES				PAGE 34 OF 35
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
COURAGEOUS CONSERVATIVES F	PAC		FEC	IDENTIFICATION NUMBER ▼
OCCUMENTAL CONTRACTOR OF THE C	7.0		С	C00587022
Check if 24-hour report 48-hour report	New repo	ort Amends repo	t filed on	/ D D / Y Y Y Y
Full Name of Payee Proton Marketing Agency, LLC		☐ Memo	M = M	blic Distribution/Dissemination
Mailing Address 325 Front St			09	04 2018
#424			Amount	
City	State	Zip Code	— I : : :	8144.65
Evanston	WY	82930		on ID : SE.5306 sbursement or Obligation
Purpose of Expenditure RoboCalls		Category/ Type	M M M 09	04 / 2018
Name of Federal Candidate:		<b>✗</b> Support	Office Sought:	₩ House District: 01
ROGERS, WENDY, , ,		Oppose	President	Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought	7 7	62383.29	Disbursement For 2018 Other	: <b>x</b> Primary General (specify) ▶
Full Name of Payee The E.W. Scripps Company		☐ Memo	tem Date of Pu	blic Distribution/Dissemination
Mailing Address 1533 Amherst Rd			Amount	
City Knoxville	State TN	Zip Code 37909	Transaction	3300.00 on ID : SE.5312 sbursement or Obligation
Purpose of Expenditure Radio Adds		Category/ Type	M M M	19 / 2018
Name of Federal Candidate:		<b>✗</b> Support	Office Sought:	₩ House District:01
ROGERS, WENDY, , ,		Oppose	President	Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought		3300.00	Disbursement For 2018 Other	Primary
(a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditu			<b>&gt;</b>	11444.65
(c) TOTAL Independent Expenditures			·	11444.65
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized			
Fahy, Amanda, , ,	[Electronically Fil	led] Date	M M / D 14	2019

#### : 97 'A - G7 9 @ 5 B9 CI G'H9 LH F9 @ 5 H98 'HC '5 'F9 DC F H Z G7 < 98 I @ 'C F' + H9 A - N5 H-C B

Form/Schedule: SE Transaction ID: SE.5312

The date of the expenditure and disbursement were correctly reported on the 24 hour report as 9/19/2019. This monthly report has been amended to reflect the correct date.

Form/Schedule: Transaction ID: