

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. 12FE4M5 MISSOURI CONSERVATIVES FOR CONGRESS PAC

ADDRESS (number and street) 7925 CLAYTON ROAD STE 200 SAINT LOUIS MO 63117 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00874156 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special Election on: 08/06/2024 in the State of MO

5. Covering Period 07/01/2024 through 07/17/2024

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 FISHER, JEDIDIAH, , ,

Signature of Treasurer FISHER, JEDIDIAH, , , Date 07/25/2024

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

MISSOURI CONSERVATIVES FOR CONGRESS PAC

Report Covering the Period: From: 07 / 01 / 2024 To: 07 / 17 / 2024

Table with 2 columns: COLUMN A This Period, COLUMN B Calendar Year-to-Date. Rows include: 6. (a) Cash on Hand January 1, 2024 (0.00); (b) Cash on Hand at Beginning of Reporting Period (55778.47); (c) Total Receipts (from Line 19) (500000.00 / 1380000.00); (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) (55778.47 / 1380000.00); 7. Total Disbursements (from Line 31) (485224.36 / 1309445.89); 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) (70554.11 / 70554.11); 9. Debts and Obligations Owed TO 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) (333816.50).

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

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

MISSOURI CONSERVATIVES FOR CONGRESS PAC

Report Covering the Period: From: MM / DD / YYYY 07 / 01 / 2024 To: MM / DD / YYYY 07 / 17 / 2024

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).....	0.00	630000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	630000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	500000.00	750000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	500000.00	1380000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
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)).....▶	500000.00	1380000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	500000.00	1380000.00

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	75.00	157462.08
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	75.00	157462.08
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)	360149.36	1026983.81
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	125000.00	125000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	125000.00	125000.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	485224.36	1309445.89
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	485224.36	1309445.89

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)	500000.00	1380000.00
34. Total Contribution Refunds (from Line 28(d))	125000.00	125000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	375000.00	1255000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	75.00	157462.08
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	75.00	157462.08

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 25
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input checked="" 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	

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)
MISSOURI CONSERVATIVES FOR CONGRESS PAC

A. BLAINE FOR CONGRESS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 98

City SAINT ELIZABETH	State MO	Zip Code 65075-0098
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FEC ID number of contributing federal political committee. **C** C00458679

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
625000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2024

Transaction ID : SA11C.232147

Amount of Each Receipt this Period
250000.00

Memo Item
CONTRIBUTION

REFUNDED \$125,000.00 ON 07/17/2024

B. BLAINE FOR CONGRESS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 98

City SAINT ELIZABETH	State MO	Zip Code 65075-0098
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FEC ID number of contributing federal political committee. **C** C00458679

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
625000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2024

Transaction ID : SA11C.232148

Amount of Each Receipt this Period
250000.00

Memo Item
CONTRIBUTION

C.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

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

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

Name of Employer (for Individual) Occupation (for Individual)

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).....	500000.00
TOTAL This Period (last page this line number only).....	500000.00

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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input checked="" 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)

MISSOURI CONSERVATIVES FOR CONGRESS PAC

Full Name (Last, First, Middle Initial)

A. BLAINE FOR CONGRESS

Mailing Address PO BOX 98

City
SAINT ELIZABETH

State
MO

Zip Code
65075

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	2	4

FEC Identification Number

C

Transaction ID : SB28C.18879

Amount of Each Disbursement this Period

125000.00

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)

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

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) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

125000.00

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

125000.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 9 OF 25
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
MISSOURI CONSERVATIVES FOR CONGRESS PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor AMERICAN VIEWPOINT INC			Nature of Debt (Purpose): SURVEY/RESEARCH SERVICES
Mailing Address 5501 MERCHANTS VIEW SQUARE #761			
City HAYMARKET	State VA	Zip Code 20169	

Outstanding Balance Beginning This Period	Transaction ID : SD24.17276	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="49700.00"/>	<input type="text" value="0.00"/>	<input type="text" value="49700.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor CROSBY OTTENHOFF GROUP			Nature of Debt (Purpose): COMPLIANCE CONSULTING
Mailing Address 611 PENNSYLVANIA AVE SE STE 267			
City WASHINGTON	State DC	Zip Code 20003	

Outstanding Balance Beginning This Period	Transaction ID : SD24.17274	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="2232.50"/>	<input type="text" value="0.00"/>	<input type="text" value="2232.50"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor PALM STRATEGIC GROUP LLC			Nature of Debt (Purpose): WEB SERVICES
Mailing Address PO BOX 2114			
City JEFFERSON CITY	State MO	Zip Code 65102	

Outstanding Balance Beginning This Period	Transaction ID : SD24.17275	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="1500.00"/>	<input type="text" value="0.00"/>	<input type="text" value="1500.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="53432.50"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 10 OF 25
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
MISSOURI CONSERVATIVES FOR CONGRESS PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor SOMETHING ELSE STRATEGIES LLC			Nature of Debt (Purpose): MEDIA PRODUCTION
Mailing Address 212 GOLDEN WILLOW COURT			
City EASLEY	State SC	Zip Code 29642	

Outstanding Balance Beginning This Period <input type="text" value="3757.20"/>	Transaction ID : SD24.16194	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="3757.20"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor SOMETHING ELSE STRATEGIES LLC			Nature of Debt (Purpose): MEDIA PRODUCTION
Mailing Address 212 GOLDEN WILLOW COURT			
City EASLEY	State SC	Zip Code 29642	

Outstanding Balance Beginning This Period <input type="text" value="8766.80"/>	Transaction ID : SD24.16195	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="8766.80"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor SOMETHING ELSE STRATEGIES LLC			Nature of Debt (Purpose): MEDIA PRODUCTION
Mailing Address 212 GOLDEN WILLOW COURT			
City EASLEY	State SC	Zip Code 29642	

Outstanding Balance Beginning This Period <input type="text" value="13900.00"/>	Transaction ID : SD24.17192	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="13900.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="26424.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 11 OF 25
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
MISSOURI CONSERVATIVES FOR CONGRESS PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor THOMPSON COMMUNICATIONS INC			Nature of Debt (Purpose): RADIO PRODUCTION
Mailing Address PO BOX 5			
City MARSHFIELD	State MO	Zip Code 65706	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD24.17270	
Amount Incurred This Period 2500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor THOMPSON COMMUNICATIONS INC			Nature of Debt (Purpose): MEDIA PLACEMENT
Mailing Address PO BOX 5			
City MARSHFIELD	State MO	Zip Code 65706	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD24.17271	
Amount Incurred This Period 139930.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 139930.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor THOMPSON COMMUNICATIONS INC			Nature of Debt (Purpose): MEDIA PLACEMENT
Mailing Address PO BOX 5			
City MARSHFIELD	State MO	Zip Code 65706	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD24.17272	
Amount Incurred This Period 20259.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 20259.00

1) SUBTOTALS This Period This Page (optional)..... ▶	162689.00
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 12 OF 25
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
MISSOURI CONSERVATIVES FOR CONGRESS PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor THOMPSON COMMUNICATIONS INC			Nature of Debt (Purpose): MEDIA PLACEMENT
Mailing Address PO BOX 5			
City MARSHFIELD	State MO	Zip Code 65706	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD24.17273	
Amount Incurred This Period 47271.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 47271.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor THOMPSON COMMUNICATIONS INC			Nature of Debt (Purpose): MEDIA PLACEMENT
Mailing Address PO BOX 5			
City MARSHFIELD	State MO	Zip Code 65706	

Outstanding Balance Beginning This Period 8729.20	Transaction ID : SD24.17257	
Amount Incurred This Period 0.00	Payment This Period 8729.20	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor THOMPSON COMMUNICATIONS INC			Nature of Debt (Purpose): MEDIA PLACEMENT
Mailing Address PO BOX 5			
City MARSHFIELD	State MO	Zip Code 65706	

Outstanding Balance Beginning This Period 69615.00	Transaction ID : SD24.17262	
Amount Incurred This Period 0.00	Payment This Period 69615.00	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)..... ▶	47271.00
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 13 OF 25
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
MISSOURI CONSERVATIVES FOR CONGRESS PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor THOMPSON COMMUNICATIONS INC			Nature of Debt (Purpose): MEDIA PLACEMENT
Mailing Address PO BOX 5			
City MARSHFIELD	State MO	Zip Code 65706	

Outstanding Balance Beginning This Period 10296.00	Transaction ID : SD24.17263	
Amount Incurred This Period 0.00	Payment This Period 10296.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor THOMPSON COMMUNICATIONS INC			Nature of Debt (Purpose): MEDIA PLACEMENT
Mailing Address PO BOX 5			
City MARSHFIELD	State MO	Zip Code 65706	

Outstanding Balance Beginning This Period 24024.00	Transaction ID : SD24.17264	
Amount Incurred This Period 0.00	Payment This Period 24024.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor THOMPSON COMMUNICATIONS INC			Nature of Debt (Purpose): RADIO PLACEMENT
Mailing Address PO BOX 5			
City MARSHFIELD	State MO	Zip Code 65706	

Outstanding Balance Beginning This Period 8333.05	Transaction ID : SD24.17265	
Amount Incurred This Period 0.00	Payment This Period 8333.05	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)..... ▶	0.00
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 14 OF 25
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
MISSOURI CONSERVATIVES FOR CONGRESS PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor THOMPSON COMMUNICATIONS INC			Nature of Debt (Purpose): RADIO PLACEMENT
Mailing Address PO BOX 5			
City MARSHFIELD	State MO	Zip Code 65706	

Outstanding Balance Beginning This Period <input type="text" value="6817.95"/>	Transaction ID : SD24.17266	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="6817.95"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor THOMPSON COMMUNICATIONS INC			Nature of Debt (Purpose): MEDIA PLACEMENT
Mailing Address PO BOX 5			
City MARSHFIELD	State MO	Zip Code 65706	

Outstanding Balance Beginning This Period <input type="text" value="6450.00"/>	Transaction ID : SD24.17267	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="6450.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor THOMPSON COMMUNICATIONS INC			Nature of Debt (Purpose): MEDIA PLACEMENT
Mailing Address PO BOX 5			
City MARSHFIELD	State MO	Zip Code 65706	

Outstanding Balance Beginning This Period <input type="text" value="15050.00"/>	Transaction ID : SD24.17268	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="15050.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 15 OF 25
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
MISSOURI CONSERVATIVES FOR CONGRESS PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor VICTORY MODELING LLC			Nature of Debt (Purpose): DATA MODELING SERVICES
Mailing Address 190 MONROE AVENUE STE 300			
City GRAND RAPIDS	State MI	Zip Code 49503	

Outstanding Balance Beginning This Period 0.00		Transaction ID : SD24.17277	
Amount Incurred This Period 44000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 44000.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

1) SUBTOTALS This Period This Page (optional)..... ▶	44000.00
2) TOTALS This Period (last page this line number only)..... ▶	333816.50
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	333816.50

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) MISSOURI CONSERVATIVES FOR CONGRESS PAC
FEC IDENTIFICATION NUMBER C C00874156

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee THOMPSON COMMUNICATIONS INC
Mailing Address PO BOX 5
City MARSHFIELD State MO Zip Code 65706
Purpose of Expenditure RADIO PRODUCTION
Name of Federal Candidate: ONDER, ROBERT, FOR, , JR.
Calendar Year-To-Date Per Election for Office Sought 1263367.81
Disbursement For: Primary

Full Name of Payee THOMPSON COMMUNICATIONS INC
Mailing Address PO BOX 5
City MARSHFIELD State MO Zip Code 65706
Purpose of Expenditure MEDIA PLACEMENT
Name of Federal Candidate: SCHAEFER, KURT, ,
Calendar Year-To-Date Per Election for Office Sought 1263367.81
Disbursement For: Primary

(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.

FISHER, JEDIDIAH, ,
Signature

Date 07 / 25 / 2024

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) MISSOURI CONSERVATIVES FOR CONGRESS PAC
FEC IDENTIFICATION NUMBER C C00874156

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee THOMPSON COMMUNICATIONS INC
Mailing Address PO BOX 5
City MARSHFIELD State MO Zip Code 65706
Purpose of Expenditure MEDIA PLACEMENT
Name of Federal Candidate: SCHAEFER, KURT, , ,
Calendar Year-To-Date Per Election for Office Sought 1263367.81
Disbursement For: Primary

Full Name of Payee THOMPSON COMMUNICATIONS INC
Mailing Address PO BOX 5
City MARSHFIELD State MO Zip Code 65706
Purpose of Expenditure MEDIA PLACEMENT
Name of Federal Candidate: ONDER, ROBERT, FOR, , JR.
Calendar Year-To-Date Per Election for Office Sought 1263367.81
Disbursement For: Primary

(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.

FISHER, JEDIDIAH, , ,
Signature

Date 07 / 25 / 2024

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) MISSOURI CONSERVATIVES FOR CONGRESS PAC
FEC IDENTIFICATION NUMBER C C00874156

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee THOMPSON COMMUNICATIONS INC
Mailing Address PO BOX 5
City MARSHFIELD State MO Zip Code 65706
Purpose of Expenditure DEBT PMT: MEDIA PLACEMENT
Name of Federal Candidate: SCHAEFER, KURT, , ,
Calendar Year-To-Date Per Election for Office Sought 1263367.81
Date of Public Distribution/Dissemination 06/28/2024
Amount 69615.00
Transaction ID : SE24.17262
Date of Disbursement or Obligation 07/01/2024
Office Sought: House District: 03 State: MO
Disbursement For: Primary General Other (specify)

Full Name of Payee THOMPSON COMMUNICATIONS INC
Mailing Address PO BOX 5
City MARSHFIELD State MO Zip Code 65706
Purpose of Expenditure DEBT PMT: MEDIA PLACEMENT
Name of Federal Candidate: SCHAEFER, KURT, , ,
Calendar Year-To-Date Per Election for Office Sought 1263367.81
Date of Public Distribution/Dissemination 06/28/2024
Amount 10296.00
Transaction ID : SE24.17263
Date of Disbursement or Obligation 07/01/2024
Office Sought: House District: 03 State: MO
Disbursement For: Primary General Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 79911.00
(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.

FISHER, JEDIDIAH, , ,
Signature

Date 07/25/2024

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) MISSOURI CONSERVATIVES FOR CONGRESS PAC
FEC IDENTIFICATION NUMBER C C00874156

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee THOMPSON COMMUNICATIONS INC
Mailing Address PO BOX 5
City MARSHFIELD State MO Zip Code 65706
Purpose of Expenditure DEBT PMT: MEDIA PLACEMENT
Name of Federal Candidate: ONDER, ROBERT, FOR, , JR.
Calendar Year-To-Date Per Election for Office Sought 1263367.81
Date of Public Distribution/Dissemination 06/28/2024
Amount 24024.00
Transaction ID : SE24.17264
Date of Disbursement or Obligation 07/01/2024
Office Sought: House District: 03 State: MO
Disbursement For: Primary General Other (specify)

Full Name of Payee THOMPSON COMMUNICATIONS INC
Mailing Address PO BOX 5
City MARSHFIELD State MO Zip Code 65706
Purpose of Expenditure DEBT PMT: RADIO PLACEMENT
Name of Federal Candidate: SCHAEFER, KURT, ,
Calendar Year-To-Date Per Election for Office Sought 1263367.81
Date of Public Distribution/Dissemination 06/28/2024
Amount 8333.05
Transaction ID : SE24.17265
Date of Disbursement or Obligation 07/01/2024
Office Sought: House District: 03 State: MO
Disbursement For: Primary General Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 32357.05
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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FISHER, JEDIDIAH, ,
Signature

Date 07/25/2024

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) MISSOURI CONSERVATIVES FOR CONGRESS PAC
FEC IDENTIFICATION NUMBER C C00874156

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee THOMPSON COMMUNICATIONS INC
Mailing Address PO BOX 5
City MARSHFIELD State MO Zip Code 65706
Purpose of Expenditure DEBT PMT: RADIO PLACEMENT
Name of Federal Candidate: ONDER, ROBERT, FOR, , JR.
Calendar Year-To-Date Per Election for Office Sought 1263367.81
Date of Public Distribution/Dissemination 06/28/2024
Amount 6817.95
Transaction ID: SE24.17266
Date of Disbursement or Obligation 07/01/2024
Office Sought: House District: 03 State: MO
Disbursement For: Primary General Other (specify)

Full Name of Payee THOMPSON COMMUNICATIONS INC
Mailing Address PO BOX 5
City MARSHFIELD State MO Zip Code 65706
Purpose of Expenditure DEBT PMT: MEDIA PLACEMENT
Name of Federal Candidate: SCHAEFER, KURT, ,
Calendar Year-To-Date Per Election for Office Sought 1263367.81
Date of Public Distribution/Dissemination 06/28/2024
Amount 6450.00
Transaction ID: SE24.17267
Date of Disbursement or Obligation 07/01/2024
Office Sought: House District: 03 State: MO
Disbursement For: Primary General Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 13267.95
(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.

FISHER, JEDIDIAH, ,
Signature

Date 07/25/2024

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) MISSOURI CONSERVATIVES FOR CONGRESS PAC
FEC IDENTIFICATION NUMBER C C00874156

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee THOMPSON COMMUNICATIONS INC
Mailing Address PO BOX 5
City MARSHFIELD State MO Zip Code 65706
Purpose of Expenditure DEBT PMT: MEDIA PLACEMENT
Name of Federal Candidate: ONDER, ROBERT, FOR, , JR.
Calendar Year-To-Date Per Election for Office Sought 1263367.81
Date of Public Distribution/Dissemination 06/28/2024
Amount 15050.00
Transaction ID : SE24.17268
Date of Disbursement or Obligation 07/01/2024
Office Sought: House District: 03 State: MO
Disbursement For: Primary General Other (specify)

Full Name of Payee THOMPSON COMMUNICATIONS INC
Mailing Address PO BOX 5
City MARSHFIELD State MO Zip Code 65706
Purpose of Expenditure MEDIA PLACEMENT
Name of Federal Candidate: ONDER, ROBERT, FOR, , JR.
Calendar Year-To-Date Per Election for Office Sought 1263367.81
Date of Public Distribution/Dissemination 06/19/2024
Amount 43050.00
Transaction ID : SE24.17257
Date of Disbursement or Obligation 06/19/2024
Office Sought: House District: 03 State: MO
Disbursement For: Primary General Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 15050.00
(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.

FISHER, JEDIDIAH, , ,
Signature

Date 07/25/2024

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

NAME OF COMMITTEE (In Full) MISSOURI CONSERVATIVES FOR CONGRESS PAC	FEC IDENTIFICATION NUMBER ▼ C C00874156
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item THOMPSON COMMUNICATIONS INC FINAL PAYMENT OF PREVIOUS MEMO ENTRY - SEE SCH D	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address PO BOX 5	Amount <input type="text"/>
City MARSHFIELD State MO Zip Code 65706	Transaction ID : SE24.17258
Purpose of Expenditure DEBT PMT: MEDIA PLACEMENT Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: ONDER, ROBERT, FOR, , JR. <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MO
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 1263367.81	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2024 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item THOMPSON COMMUNICATIONS INC	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address PO BOX 5	Amount <input type="text"/>
City MARSHFIELD State MO Zip Code 65706	Transaction ID : SE24.17293
Purpose of Expenditure MEDIA PLACEMENT Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: SCHAEFER, KURT, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MO
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 1263367.81	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2024 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 116324.20
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

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.

FISHER, JEDIDIAH, , , Date / /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) MISSOURI CONSERVATIVES FOR CONGRESS PAC
FEC IDENTIFICATION NUMBER C C00874156

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee THOMPSON COMMUNICATIONS INC
Mailing Address PO BOX 5
City MARSHFIELD State MO Zip Code 65706
Purpose of Expenditure MEDIA PLACEMENT
Name of Federal Candidate: SCHAEFER, KURT, , ,
Calendar Year-To-Date Per Election for Office Sought 1263367.81
Disbursement For: Primary

Full Name of Payee THOMPSON COMMUNICATIONS INC
Mailing Address PO BOX 5
City MARSHFIELD State MO Zip Code 65706
Purpose of Expenditure MEDIA PLACEMENT
Name of Federal Candidate: ONDER, ROBERT, FOR, , JR.
Calendar Year-To-Date Per Election for Office Sought 1263367.81
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 51785.00
(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.

FISHER, JEDIDIAH, , ,
Signature

Date 07 / 25 / 2024

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) MISSOURI CONSERVATIVES FOR CONGRESS PAC
FEC IDENTIFICATION NUMBER C C00874156

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee THOMPSON COMMUNICATIONS INC
Mailing Address PO BOX 5
City MARSHFIELD State MO Zip Code 65706
Purpose of Expenditure RADIO PLACEMENT
Name of Federal Candidate: ONDER, ROBERT, FOR, , JR.
Calendar Year-To-Date Per Election for Office Sought 1263367.81
Disbursement For: Primary

Full Name of Payee THOMPSON COMMUNICATIONS INC
Mailing Address PO BOX 5
City MARSHFIELD State MO Zip Code 65706
Purpose of Expenditure MEDIA PLACEMENT
Name of Federal Candidate: SCHAEFER, KURT, ,
Calendar Year-To-Date Per Election for Office Sought 1263367.81
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 36404.16
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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FISHER, JEDIDIAH, ,
Signature

Date 07 / 25 / 2024

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) MISSOURI CONSERVATIVES FOR CONGRESS PAC
FEC IDENTIFICATION NUMBER C C00874156

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee THOMPSON COMMUNICATIONS INC
Mailing Address PO BOX 5
City MARSHFIELD State MO Zip Code 65706
Purpose of Expenditure MEDIA PLACEMENT
Name of Federal Candidate: ONDER, ROBERT, FOR, , JR.
Calendar Year-To-Date Per Election for Office Sought 1263367.81
Date of Public Distribution/Dissemination 07 / 02 / 2024
Amount 15050.00
Transaction ID : SE24.17300
Date of Disbursement or Obligation 07 / 02 / 2024
Office Sought: House District: 03 State: MO
Disbursement For: Primary General Other (specify)

Full Name of Payee
Mailing Address
City
State
Zip Code
Purpose of Expenditure
Category/Type
Name of Federal Candidate:
Office Sought: House District: State:
Disbursement For: Primary General Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 15050.00, (b) SUBTOTAL of Unitemized Independent Expenditures, (c) TOTAL Independent Expenditures 360149.36

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FISHER, JEDIDIAH, ,
Signature

Date 07 / 25 / 2024