PAGE 1 / 35

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X	For Oth	ner Than An Aut	horized Con	nmittee		Office Use Only	
NAME OF COMMITTEE (in full)	-	R PRINT ▼	Example: over the I	If typing, type nes.	12FE4M	5	
COURAGEOUS	CONSERV	ATIVES PAC					1
	212 Y	eardley Ave					
ADDRESS (number and st	reet)						
Check if differenthan previously reported. (ACC)	Lvnc	hburg			VA	24501	-
2. FEC IDENTIFICAT	ON NUMBER	▼ CI	TY 🛦		STATE ▲	ZIP CO	DE 🛦
C C00587022			S THIS REPORT	NEW (N) OR		IENDED	
4. TYPE OF REPOR (Choose One) (a) Quarterly Report	(Report Due On:	o 20 (M2) r 20 (M3)	May 20 (M5) Sep	20 (M8) 20 (M9)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly R	enort (O1)	Apr	20 (M4)	Jul 20 (M7)	Oct :	20 (M10)	Jan 31 (YE)
July 15 Quarterly R	(6	PRE-Election Report for the:		ry (12P) ntion (12C)	General Special (Runoff (12R)
October 15 Quarterly R January 31		[]aati	on on 1		2018	in the	
Year-End R July 31 Mid Report (Nor Year Only)	-Year n-election	d) 30-Day POST-Election Report for the:	511 511	al (30G)	Runoff (3	State of	Special (30S)
Termination (TER)	Report	Election	on on	M / D D /	Y Y Y	in the State of	of
5. Covering Period	10	01 2018		ough 10	17	2018	
I certify that I have exan Type or Print Name of T	Fahy	rt and to the best of , Amanda, , ,	f my knowledge	and belief it is	true, correct and	d complete.	
Signature of Treasurer	Fahy, Amanda,	.,,	[Electr	onically Filed]	Date 10	/ D D /	2018
NOTE: Submission of false	e, erroneous, or	incomplete information	n may subject t	ne person signing	this Report to the	ne penalties of 52	U.S.C. § 30109
Office Use						FEC FOR Rev. 05/2	

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
6.	(a) Cash on Hand January 1, 2018		2510.43
	(b) Cash on Hand at Beginning of Reporting Period	30175.68	
	(c) Total Receipts (from Line 19)	128221.00	304772.00
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	158396.68	307282.43
.	Total Disbursements (from Line 31)	36807.11	185692.86
3.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	121589.57	121589.57
١.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
0.	. 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

(other than loans) From: s/Persons Other tical Committees ed (use Schedule A)	125500.00 2721.00 128221.00 0.00 128221.00 0.00 0.00 0.00 0.00	273000.00 3272.00 276272.00 0.00 276272.00 0.00 28500.00
tical Committees ed (use Schedule A)	2721.00 128221.00 0.00 0.00 128221.00 0.00 0.00	3272.00 276272.00 0.00 0.00 276272.00 0.00
ed (use Schedule A)	2721.00 128221.00 0.00 0.00 128221.00 0.00 0.00	3272.00 276272.00 0.00 0.00 276272.00 0.00
nized	2721.00 128221.00 0.00 0.00 128221.00 0.00 0.00	3272.00 276272.00 0.00 0.00 276272.00 0.00
L (add 11(a)(i) and (ii)	128221.00 0.00 0.00 128221.00 0.00 0.00	276272.00 0.00 0.00 276272.00 0.00 28500.00
arty Committees	0.00 0.00 128221.00 0.00	0.00 0.00 276272.00 0.00 28500.00
Party Committees	0.00 0.00 128221.00 0.00	0.00 276272.00 0.00 28500.00
itical Committees PACs) tributions (add Lines (b), and (c)) (Carry Line 33, page 5) n Affiliated/Other ees eived ents Received erating Expenditures sates, etc.)	0.00 128221.00 0.00 0.00	0.00 276272.00 0.00 28500.00
PACs) tributions (add Lines (b), and (c)) (Carry Line 33, page 5) n Affiliated/Other ees eived ents Received erating Expenditures states, etc.)	128221.00 0.00 0.00	276272.00 0.00 28500.00
tributions (add Lines (b), and (c)) (Carry Line 33, page 5)	128221.00 0.00 0.00	276272.00 0.00 28500.00
(b), and (c)) (Carry Line 33, page 5) n Affiliated/Other ees eived ents Received erating Expenditures ates, etc.)	0.00	0.00 28500.00
Line 33, page 5) n Affiliated/Other ees eived ents Received erating Expenditures ates, etc.)	0.00	0.00 28500.00
erating Expenditures ates, etc.)	0.00	0.00 28500.00
eeseivedeivedents Receivederating Expenditures ates, etc.)	0.00	28500.00
eived ents Received erating Expenditures ates, etc.)	0.00	28500.00
ents Receivederating Expenditures ates, etc.)		
erating Expenditures ates, etc.)	0.00	0.00
erating Expenditures ates, etc.)	0.00	0.00
erating Expenditures ates, etc.)	4 4	
ates, etc.)		
	0.00	0.00
ontributions Made	4 4	4 4
ndidates and Other		
nittees	0.00	0.00
Receipts		
erest, etc.)	0.00	0.00
Non-Federal and Levin Funds	4 4	45 45 45
al Account	 	
edule H3)	0.00	0.00
=		
ds (from Schedule H5)	0.00	0.00
fers (add 18(a) and 18(b))	0.00	0.00
	erest, etc.)	erest, etc.)

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)	1000 1000	Jaionau Tear-to-Date
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating	1807.11	15836.57
Expenditures(c) Total Operating Expenditures	1007.11	1000.07
(add 21(a)(i), (a)(ii), and (b))▶ Transfers to Affiliated/Other Party	1807.11	15836.57
Committees	0.00	0.00
Federal Candidates/Committees and Other Political Committees	0.00	0.00
Independent Expenditures	25000.00	160956 20
(use Schedule E) Coordinated Party Expenditures (52 U.S.C. § 30116(d))	35000.00	169856.29
(use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans MadeRefunds of Contributions To:	0.00	0.00
(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)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))▶	0.00	0.00
Other Disbursements (Including		
Non-Federal Donations)	0.00	0.00
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(b) Federal Election Activity Paid	0.00	0.00
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
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	36807.11	185692.86
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	36807.11	185692.86

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	128221.00	276272.00
Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	128221.00	276272.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	1807.11	15836.57
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
3. Net Operating Expenditures (subtract Line 37 from Line 36)	1807.11	15836.57

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

							6	OF	35
(check only one)									
	X	11a		11b		11c	12		
		13		14		15	16	;	17

	the name and address of any political committee t			
NAME OF COMMITTEE (In Full) COURAGEOUS CONSERVATION	TIVES PAC			
Full Name of Individual (Last, First, Middle I A. Hillman, Tatnall, , ,	Initial) or Full Organization Name	Date of Receipt		
Mailing Address 504 W Bleeker St		10 04 Y Y Y Y Y Y		
City	State Zip Code	Transaction ID : SA11AI.5410		
Aspen	CO 81611	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	75000.00		
Name of Employer (for Individual)	of Employer (for Individual) Occupation (for Individual)			
Retired	Retired	_		
Receipt For:	Aggregate Year-to-Date ▼	1		
Primary General	30 0			
Other (specify) ▼	175000.00			
Full Name of Individual (Last, First, Middle I Hillman, Tatnall, , ,	Date of Receipt			
Mailing Address 504 W Bleeker St	10 16 2018			
City	State Zip Code	Transaction ID : SA11AI.5411		
Aspen	CO 81611	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	50000.00		
Name of Employer (for Individual) Retired	Occupation (for Individual) Retired	Memo Item		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 225000.00			
Full Name of Individual (Last, First, Middle I	Initial) or Full Organization Name	Date of Receipt		
Mailing Address 10452 East Quartz Rock Ro	t	10 11 2018		
City	State Zip Code	Transaction ID : SA11AI.5526		
Scottsdale	AZ 85255	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	500.00		
Name of Employer (for Individual) Retired	Occupation (for Individual) Retired	Memo Item		
Receipt For:	Aggregate Year-to-Date ▼	1		
Primary General Other (specify)	500.00			
SUBTOTAL of Receipts This Page (optional)	>	125500.00		
TOTAL This Period (last page this line number	er only)	125500.00		

S П

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER:	PAGE 7 OF 35				
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(orlean orling	nly one)					
	Detailed Summary Page	X 21b 28a		26 27 29 30b				
Assistant and Other								
Any information copied from such Reports and Staten or for commercial purposes, other than using the name								
NAME OF COMMITTEE (In Full)	<u></u>							
COURAGEOUS CONSERVATIVE	S PAC							
Full Name (Last, First, Middle Initial)								
A. A.F. Branco Art			Date of Disbursement					
Mailing Address 10596 Alta Vista			10 11	2018				
City	State Zip Code		FEC Identification Num	nher				
000.0 1100.0)	WA 98284			ibei				
Purpose of Disbursement Advertisement		C C00587022 Transaction ID : S	R21R 5580					
Candidate Name		Category/	Amount of Each Disbu					
COURAGEOUS CONSERVATIVES Office Sought: House Disbursen	l l	Туре		500.00				
	nent For: 2018 Primary		95	300.00				
	Other (specify)		Mama Itam					
State: District: Memo Item								
Full Name (Last, First, Middle Initial)								
B. C&H Financial Services		Date of Disbursement	YYYY					
Mailing Address 1 Westbrook Corporate Center Ste 300		10 10 2018						
,	State Zip Code		FEC Identification Nun	nber				
Westchester Purpose of Disbursement	IL 60154		0.00507000					
Bank Card Fees			C C00587022					
Candidate Name		Category/	Transaction ID: S Amount of Each Disbu					
COURAGEOUS CONSERVATIVE		Type						
	nent For: 2018			20.00				
	Primary General Other (specify)							
State: District:	other (specify)		Memo Item					
Full Name (Last, First, Middle Initial)								
C. Stripe			Date of Disbursement					
Mailian Address 105 D			M M / D D /	2049				
Mailing Address 185 Berry St #550			10 17	2018				
	State Zip Code		FEC Identification Num	nher				
San Francisco	CA 94107							
Purpose of Disbursement CC Fee			C C00587022					
Candidate Name		0-1	Transaction ID : S					
COURAGEOUS CONSERVATIVE	SPAC	Category/ Type	Amount of Each Disbu	irsement this Period				
Office Sought: House Disbursen	nent For: 2018			1106.27				
	Primary General							
	Other (specify) ▼		Memo Item					
State: District:								
SUBTOTAL of Disbursements This Page (optional)		······	7	1626.27				
TOTAL This Period (last page this line number only)		.						

17

SCHEDULE B (FEC Form 3X)	l le -	water activity ()	FOR LI	INE NUI	MBER:		P/	AGE	8 OF	F 35
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(official offic)				1 07			
		Summary Page		21b 28a	22 28b	23 28c	26		27 30b	
Any information conicd from such Deposits and Chatem										
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam										
NAME OF COMMITTEE (In Full)										
COURAGEOUS CONSERVATIVES	S PAC									
/										
Full Name (Last, First, Middle Initial)					Date of D	Nichurcor	nont			
A. Wells Fargo				'						
Mailing Address Rt. 70					10	01			118	
,	State NJ	Zip Code 08055		F	FEC Identification Number					
Medford Purpose of Disbursement				2050700	0	-				
Bankcard Fees		C C00587022								
Candidate Name			Category	Transaction ID : SB21B.5586 Category/ Amount of Each Disbursement this Pe					eriod	
COURAGEOUS CONSERVATIVES			Type					_		-
	nent For: 2					7			150.84	
	Primary Other (spec	General								
State: District:	Other (spec	Sily) ▼			Mem	o Item				
Full Name (Last, First, Middle Initial)										
B. Wells Fargo					Date of Disbursement					
			_	M = M	/ D I			Y		
Mailing Address Rt. 70					10	09	ч .	_ 20	018	_
City	State	Zip Code		F	FEC Iden	tification	Numbe	er		
Medford Purpose of Disbursement	NJ	08055								
Wire Fee				7 Ľ	C C00587022					
Candidate Name		Category/	,	Trans Amount o	saction I	_			oriod	
COURAGEOUS CONSERVATIVES	S PAC		Type		Amount C	I Lacii L	Jisbuise	SITIOTIL	1113 1 0	FIIOU
	nent For: 2								30.00	
	Primary	∡ General								
President State: District:	Other (spec	сіту)			Mem	o Item				
Full Name (Last, First, Middle Initial)										
C.				1	Date of D	Disburser	nent			
					M M	/ D I) /	Y Y	Y	
Mailing Address										_
City	State	Zip Code				tification	Numbe			
					FEC Iden	uncation	NUTTIDE	71	-	
Purpose of Disbursement				7	C _					
Candidate Name				413						
Canadate Name			Category/ Type	/ /	Amount o	t Each L	Disburse	ement	this Pe	eriod
Office Sought: House Disburserr	nent For:		- 7,00							
	Primary	General				7				
	Other (spec	cify) 🔻			Mem	o Item				
State: District:										
SUPTOTAL of Dishurasments This Dane (anti-unit)									180.84	4
SUBTOTAL of Disbursements This Page (optional)			······)			7		+	135.0	#
TOTAL This Period (last page this line number only).			ì						1807.11	1

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

PAGE 9 OF 35

		Detailed Sulfillary Page FOR LINE 13 OF FORM 3X				
IAME OF COMMITTEE (In Full) COURAGEOUS CONSERVATIVE	S PAC	Transaction ID : SC/10.4280				
LOAN SOURCE Full Name (Last, First, Mi Ekstrom, Christopher, , ,	ddle Initial)	N ☐ Memo Item				
Mailing Address 25 Highland Park Village		U Other (specify) ▼				
Suite 100 City	State	ZIP Code				
Dallas	TX	75205				
Original Amount of Loan	Cumulative Pay					
12000.00	7	0.00 12000.00				
TERMS Date Incurred	Da	ate Due Interest Rate Secured:				
M 10 M / D 21 D / Y 2015	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)	<u>'</u>	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		, 1200.00				
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 10 OF 35

FOR LINE 13 OF FORM 3X

		TOTALINE TO TOTAL TO OF TOTAL ON				
IAME OF COMMITTEE (In Full) COURAGEOUS CONSERVATIV	/ES PAC	Transaction ID : SC/10.4281				
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 Page	yment To Date Balance Outstanding at Close of This Period				
15000.00		0.00 15000.00				
Date Incurred 11 05 2015	M M / D D	late Due Interest Rate Secured: 'Yes No				
	<u> </u>	% (apr) Yes X No				
List All Endorsers or Guarantors (if any 1. Full Name (Last, First, Middle Initial)	/) 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 (option	al)	15000.00				
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				
IAME OF COMMITTEE (IN FUII) COURAGEOUS CONSERVATI	VES PAC	Transaction ID : SC/10.4283				
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				
30000.00		0.00 30000.00				
Date Incurred M11 / D17 / Y 2015	D D D	ate Due Interest Rate Secured: / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
List All Endorsers or Guarantors (if any) to Loan Source						
1. Full Name (Last, First, Middle Initial)		Name of Employer				
Mailing Address		Occupation				
City Stat	e ZIP Code	Amount Guaranteed Outstanding:				
2. Full Name (Last, First, Middle Initial)	,	Name of Employer				
Mailing Address		Occupation				
City Stat	e ZIP Code	Amount Guaranteed Outstanding:				
3. Full Name (Last, First, Middle Initial)		Name of Employer				
Mailing Address		Occupation				
City	e ZIP Code	Amount Guaranteed Outstanding:				
4. Full Name (Last, First, Middle Initial)	,	Name of Employer				
Mailing Address		Occupation				
City Stat	e ZIP Code	Amount Guaranteed Outstanding:				
SUBTOTALS This Period This Page (optio	nal)	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 12 OF 35

Detailed Suffillary Fage FOR LINE 13 OF FORM 3X				
IAME OF COMMITTEE (In Full) COURAGEOUS CONSERVATIVE	Transaction ID : SC/10.4404			
LOAN SOURCE Full Name (Last, First, Mir Ekstrom, Christopher, , ,	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		
6500.00	-	0.00 6500.00		
TERMS Date Incurred	Da	ate Due Interest Rate Secured:		
M 01 M / D 05 D / Y 2016	M M / D D	/ 11/8/16 0.00 % (apr) Yes ✗ No		
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) 6500.00 FOTALS 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 13 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 14 OF 35

FOR LINE 13 OF FORM 3X

		, , , , , , , , , , , , , , , , , , , ,
AME OF COMMITTEE (In Full) COURAGEOUS CONSERVATI	/ES PAC	Transaction ID : SC/10.4406
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	yment To Date Balance Outstanding at Close of This Period
8000.00		0.00 8000.00
TERMS Date Incurred	D	ate Due Interest Rate Secured:
M 01 M / D 25 D / Y 2016 Y	M M / D D	/ 11/8/16 0.00 % (apr) Yes ✗ No
List All Endorsers or Guarantors (if an	y) to Loan Source	
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	ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City	ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This Page (option	al)	8000.00
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.

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

PAGE 15 OF 35

FOR LINE 13 OF FORM 3X

		TOTALINE TO OT TOTALINE		
IAME OF COMMITTEE (In Full) COURAGEOUS CONSERVATIV	/ES PAC	Transaction ID : SC/10.4500		
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		
8500.00		0.00 8500.00		
TERMS Date Incurred	D	ate Due Interest Rate Secured:		
M ₀₂ M / D ₀₃ D / Y 2016	M = M / D = D	0.00 % (apr) Yes X No		
List All Endorsers or Guarantors (if any	y) to Loan Source			
1. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State ZIP Code		Amount Guaranteed Outstanding:		
3. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:		
4. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:		
SUBTOTALS This Period This Page (optional)				
OTALS 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 16 OF 35

FOR LINE 13 OF FORM 3X

AME OF COMMITTEE (IN FU	•	S PAC	Transaction ID : SC/10.4505
LOAN SOURCE Full Nam Ekstrom, Christopher, , ,	e (Last, First, M	iddle Initial)	N
Mailing Address 25 Highland Suite 100	d Park Village		General Other (specify) ▼
City		State	ZIP Code
Dallas		TX	75205
Original Amount of Loan	30000.00	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period 0.00 30000.00
TERMS Date Incurred Date Due 02 / 12 / 2016			
List All Endorsers or Gual 1. Full Name (Last, First, M	, ,,	to Loan Source	Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, M	fiddle Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, M	fiddle Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, M	fiddle Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
CUBTOTALS This Period This			30000.00
	nly to LINE 3, Sc	hedule D, for th	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 17 OF 35

	Detailed Summary 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		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			
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	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 18 OF 35

FOR LINE 13 OF FORM 3X NAME OF COMMITTEE (In Full) Transaction ID: SC/10.4555 **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 10000.00 10000.00 0.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 18 03 2016 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)..... 10000.00 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 19 OF 35

FOR LINE 13 OF FORM 3X

AME OF COMMITTEE (In Full) COURAGEOUS CONSE	RVATIVE	ES PAC	Transaction ID : SC/10.4892
LOAN SOURCE Full Name (L Ekstrom, Christopher, , ,	ast, First, M	iddle Initial)	Memo Item Election: Primary General
Mailing Address 25 Highland Pa Suite 100	rk Village		Other (specify) ▼
City		State	ZIP Code
Dallas		TX	75205
Original Amount of Loan	1567.89	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period 0.00 4567.89
TERMS Date Incurred Date Due			ate Due Interest Rate Secured: 0.00 % (apr) Yes X No
List All Endorsers or Guaranto 1. Full Name (Last, First, Middl		to Loan Source	Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middl	e Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middl	e 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:
GUBTOTALS This Period This Page in			, 4307.03
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 20 OF 35

FOR LINE 13 OF FORM 3X

AME OF COMMITTEE (In Full COURAGEOUS CONS	•	S PAC	Transaction ID : SC/10.4891
LOAN SOURCE Full Name Ekstrom, Christopher, , ,	(Last, First, M	iddle Initial)	N ☐ Memo Item
Mailing Address 25 Highland Suite 100	Park Village		Other (specify) ▼
City		State	ZIP Code
Dallas		TX	75205
Original Amount of Loan	6000.00	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period 0.00 6000.00
TERMS Date Incurred	^Y 2016	M = M / D = E	Date Due Interest Rate Secured: 0.00 % (apr) Yes No
List All Endorsers or Guara 1. Full Name (Last, First, Mi	, ,,	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, Mi	ddle Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Mi	ddle Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
UBTOTALS This Period This OTALS This Period (last page			
			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 21 OF 35

FOR LINE 13 OF FORM 3X

AME OF COMMITTEE (In Full) COURAGEOUS CONSER	RVATIVE	S PAC	Transaction ID : SC/10.4918
LOAN SOURCE Full Name (La 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	013.46	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period 0.00 10013.46
Date Incurred M 08		M M / D D	ate Due Interest Rate Secured: 12/31/2020 0.00 % (apr) Yes X No
List All Endorsers or Guaranton 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 t	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 22 OF 35

	Detailed Summary Page FOR LINE 13 OF FORM 3X				
IAME OF COMMITTEE (In Full) COURAGEOUS CONSERVATIVE	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)					
OTALS This Period (last page in this line only)					
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 23 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 Villa Suite 100	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	al)			Name of Employer	
Mailing Address				Occupation	
City	State ZIP Code			Amount Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Initia	al)			Name of Employer	
Mailing Address				Occupation	
City	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)					
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 24 OF 35

FOR LINE 13 OF FORM 3X

		TOTALINE TO TOTAL TO OF TOTAL ON			
IAME OF COMMITTEE (In Full) COURAGEOUS CONSERVATIV	/ES PAC	Transaction ID : SC/10.4995			
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	yment To Date Balance Outstanding at Close of This Period			
12500.00		0.00 12500.00			
TERMS Date Incurred	D	ate Due Interest Rate Secured:			
M 08	M = M / D = D	/ 12/31/2021			
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	ZIP Code	Amount Guaranteed Outstanding:			
SUBTOTALS This Period This Page (option	SUBTOTALS This Period This Page (optional)				
OTALS This Period (last page in this line only)					
Carry outstanding halance 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 25 OF 35

		Detailed Sulfillary Page FOR LINE 13 OF FORM 3X		
IAME OF COMMITTEE (In Full) COURAGEOUS CONSERVATIVE	ES PAC	Transaction ID : SC/10.4996		
LOAN SOURCE Full Name (Last, First, N 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		
300.00		0.00		
TERMS Date Incurred	D	ate Due Interest Rate Secured:		
M 08 / 31 / Y Y 2017 Y	M = M / D = D	12/31/2021 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)		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 26 OF 35

		Detailed Summary Page 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, , ,	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		
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 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 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 27 OF 35

FOR LINE 13 OF FORM 3X

		TOTAL TO OF TOTAL ON
NAME OF COMMITTEE (IN Full) COURAGEOUS CONSERVATIV	/ES PAC	Transaction ID: SC/10.5068
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
11000.00		0.00 11000.00
TERMS Date Incurred	D	ate Due Interest Rate Secured:
M 10 M / D 16 M Y 2017	M M / D D	/ 12/31/2021 0.00 % (apr) Yes ✗ No
List All Endorsers or Guarantors (if any) to Loan Source	N CF
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	al)	11000.00
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 28 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 Par Suite 100	k Village		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		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 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 29 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, , ,	First, Mi	ddle Initial)	N ☐ Memo Item
Mailing Address 25 Highland Park V Suite 100	illage		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		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 (, 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 30 OF 35

FOR LINE 13 OF FORM 3X

		TOTAL TO OF TOTAL ON		
IAME OF COMMITTEE (In Full) COURAGEOUS CONSERVATI	/ES PAC	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 (optional)				
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 31 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 Mailing Address Occupation City State ZIP Code Amount Guaranteed Amount Guaranteed		/ 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 32 OF 35

FOR LINE 13 OF FORM 3X

		Potanou cummary rago Torr Elive 15 of Torrior 5X		
IAME OF COMMITTEE (In Full) COURAGEOUS CONSERVAT	IVES PAC	Transaction ID: SC/10.5146		
LOAN SOURCE Full Name (Last, Firs Ekstrom, Christopher, , ,	t, 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		
500.00		0.00		
TERMS Date Incurred	Di	ate Due Interest Rate Secured:		
M 04 M / D 14 D / Y 2018 Y	M M / D D	/ 12/31/2025		
List All Endorsers or Guarantors (if a	ny) to Loan Source			
1. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City	te ZIP Code	Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)	'	Name of Employer		
Mailing Address		Occupation		
City	te ZIP Code	Amount Guaranteed Outstanding:		
3. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City	te ZIP Code	Amount Guaranteed Outstanding:		
4. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City	te ZIP Code	Amount Guaranteed Outstanding:		
SUBTOTALS This Period This Page (optional)				
TOTALS This Period (last page in this line	only)			
Carry outstanding halance 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 33 OF 35

		Detailed Sulfillary Page FOR LINE 13 OF FORM 3X		
IAME OF COMMITTEE (In Full) COURAGEOUS CONSERVATIVE	S PAC	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 34 OF 35

FOR LINE 13 OF FORM 3X

AME OF COMMITTEE (In Full) COURAGEOUS CONSE	RVATIVE	ES PAC	Transaction ID : SC/10.5243
LOAN SOURCE Full Name (L Ekstrom, Christopher, , ,	ast, First, M	liddle Initial)	N ☐ Memo Item
Mailing Address 25 Highland Par Suite 100	rk Village		Other (specify) ▼
City		State	ZIP Code
Dallas		TX	75205
Original Amount of Loan		Cumulative Pay	rment To Date Balance Outstanding at Close of This Period
	00.00		0.00
TERMS Date Incurred		D	ate Due Interest Rate Secured:
M 06 / D 08 / Y 20	18 Y	M M / D D	/ 12/31/2020
List All Endorsers or Guaranto	ors (if any)	to Loan Source	
1. Full Name (Last, First, Middle	e 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		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 Pag	ge (optional)		6000.00
TOTALS This Period (last page in	this line on	ly)	294251.32
Carry outstanding balance only to	LINE 3, Sc	hedule D, for this	line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

TEMIZED INDEPENDENT EXPENDITURES	3			PAGE 35 OF 35	
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X	
COURAGEOUS CONSERVATIVES	PAC			FEC IDENTIFICATION NUMBER ▼	
				C C00587022	
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	"M / D "D / Y "Y "Y "Y	
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination	
American Cámpaign Services, LLC				10 09 2018	
Mailing Address 5830 E 2nd St			Amou	nt	
Ste 8			741104		
City	State	Zip Code		35000.00	
Casper	WY	82609		saction ID: SE.5366 of Disbursement or Obligation	
Purpose of Expenditure Banner Ads		Category/ Type		10 09 2018	
Name of Federal Candidate:		✗ Support	Office Sough	nt: X House District: 01	
ROGERS, WENDY, , ,		Oppose	Presid		
Calendar Year-To-Date Per Election for Office Sought		38300.00	Disbursemer	nt For: Primary ✗ General Other (specify) ▶	
Full Name of Payee		☐ Memo	l _	of Public Distribution/Dissemination	
Man / Dad / Yayayay					
Mailing Address					
Mailing Address			Amou	nt	
O'h	01-1-	7:- 0-1-			
City	State	Zip Code			
	Date of Disbursement or Obligation				
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y	
		Type			
Name of Federal Candidate: Support Office Sought: House District:					
		Oppose	Presid	ent Senate State:	
Calendar Year-To-Date			Disbursemer	nt For: Primary General	
Per Election for Office Sought	7			Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditure	s		· •	35000.00	
(b) CURTOTAL of Unitersized Independent Europadition					
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures			•	35000.00	
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid party committee) any political party committee or its	late or authorized				
Fahy, Amanda, , ,	[Electronically Fi	led1 -	M = M /	D D / Y Y Y Y Y	
Signature	Lacerometry I'll	Date	e 10	23 2018	