



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**COURAGEOUS CONSERVATIVES PAC**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>	<input type="text" value="2510.43"/>	<input type="text" value="2510.43"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="23068.98"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="17550.00"/>	<input type="text" value="76050.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="40618.98"/>	<input type="text" value="78560.43"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="36477.27"/>	<input type="text" value="74418.72"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="4141.71"/>	<input type="text" value="4141.71"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="294251.32"/>	

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

**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

Write or Type Committee Name

COURAGEOUS CONSERVATIVES PAC

Report Covering the Period: From: 06 / 01 / 2018 To: 06 / 30 / 2018

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).....	11500.00	47500.00
(ii) Unitemized .....	50.00	50.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	11550.00	47550.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	11550.00	47550.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	6000.00	28500.00
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)).....▶	17550.00	76050.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	17550.00	76050.00

**DETAILED SUMMARY PAGE**

of Disbursements

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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 .....	4204.27	5245.72
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	4204.27	5245.72
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) .....	32273.00	69173.00
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).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
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)) ..	36477.27	74418.72
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	36477.27	74418.72

**DETAILED SUMMARY PAGE**  
of Disbursements

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<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	11550.00	47550.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	11550.00	47550.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	4204.27	5245.72
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	4204.27	5245.72

**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 39
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)  
**COURAGEOUS CONSERVATIVES PAC**

**A. Cooley, William, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 229 Edmore Rd  
 City West Palm Beach State FL Zip Code 33405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 06 / 03 / 2018  
**Transaction ID : SA11AI.5244**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item

**B. Lind, Howard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1230 Stoneham Ct  
 City McLean State VA Zip Code 22101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) International Stability Ops As Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 26000.00

Date of Receipt 06 / 07 / 2018  
**Transaction ID : SA11AI.5249**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. Lind, Phyllis, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9513 Veirs Dr No 1  
 City Rockville State MD Zip Code 20850  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 07 / 2018  
**Transaction ID : SA11AI.5251**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5500.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 7 OF 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**COURAGEOUS CONSERVATIVES PAC**

**A. McMahon, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. Box 12199  
 City San Antonio State TX Zip Code 78212  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Oil & Gas  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 05 / 2018  
**Transaction ID : SA11AI.5253**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**B. Naegle, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 236 Rue Du Jardin  
 City Naples State FL Zip Code 34105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Winnesota Wilds Occupation (for Individual) Chairman  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 05 / 2018  
**Transaction ID : SA11AI.5246**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Naegle, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 236 Rue Du Jardin  
 City Naples State FL Zip Code 34105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Winnesota Wilds Occupation (for Individual) Chairman  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 05 / 2018  
**Transaction ID : SA11AI.5247**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6000.00
<b>TOTAL</b> This Period (last page this line number only).....	11500.00

**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 8 OF 39
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input checked="" type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**COURAGEOUS CONSERVATIVES PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Ekstrom, Christopher, , ,

Mailing Address 25 Highland Park Village  
Suite 100

City Dallas State TX Zip Code 75205

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

Name of Employer (for Individual) Self-employed Occupation (for Individual) Investor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
28500.00

Date of Receipt  
MM / DD / YYYY  
06 / 08 / 2018

**Transaction ID : SA13.5243**

Amount of Each Receipt this Period  
6000.00

Memo Item

**B.** 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  
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

**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  
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6000.00
<b>TOTAL</b> This Period (last page this line number only).....	6000.00



**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 checked="" 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 type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**COURAGEOUS CONSERVATIVES PAC**

Full Name (Last, First, Middle Initial)

**A. Anedot**

Mailing Address PO Box 84314

City Baton Rouge State LA Zip Code 70884

Purpose of Disbursement  
Credit Card Fee

Candidate Name  
**COURAGEOUS CONSERVATIVES PAC**

Office Sought:  House  Senate  President  
Disbursement For: 2018  
 Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2018

FEC Identification Number

C C00587022

Transaction ID : SB21B.5229

Amount of Each Disbursement this Period

343.20

Memo Item

Full Name (Last, First, Middle Initial)

**B. Atlantic Media**

Mailing Address Box 297

City Rodanthe State NC Zip Code 27968

Purpose of Disbursement  
Media Consulting

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2018  
 Primary  General  Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
06 / 11 / 2018

FEC Identification Number

C

Transaction ID : SB21B.5255

Amount of Each Disbursement this Period

3700.22

Memo Item

Full Name (Last, First, Middle Initial)

**C. C&H Financial Services**

Mailing Address 1 Westbrook Corporate Center  
Ste 300

City Westchester State IL Zip Code 60154

Purpose of Disbursement  
Bankcard Fees

Candidate Name  
**COURAGEOUS CONSERVATIVES PAC**

Office Sought:  House  Senate  President  
Disbursement For: 2018  
 Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
06 / 04 / 2018

FEC Identification Number

C C00587022

Transaction ID : SB21B.5207

Amount of Each Disbursement this Period

50.85

Memo Item

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

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

4094.27

**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 checked="" 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 type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**COURAGEOUS CONSERVATIVES PAC**

Full Name (Last, First, Middle Initial) <b>A. C&amp;H Financial Services</b>		Date of Disbursement MM / DD / YYYY 06 / 06 / 2018
Mailing Address 1 Westbrook Corporate Center Ste 300		FEC Identification Number C C00587022 <b>Transaction ID : SB21B.5209</b>
City Westchester	State IL	Zip Code 60154
Purpose of Disbursement Gateway Services Webpayment		Amount of Each Disbursement this Period 20.00
Candidate Name <b>COURAGEOUS CONSERVATIVES PAC</b>		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	20.00
<b>TOTAL</b> This Period (last page this line number only).....▶	4114.27

**SCHEDULE C (FEC Form 3X)**

**LOANS**

NAME OF COMMITTEE (In Full) **COURAGEOUS CONSERVATIVES PAC** Transaction ID : **SC/10.4280**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Ekstrom, Christopher, , ,			<input checked="" type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 25 Highland Park Village Suite 100				
City Dallas	State TX	ZIP Code 75205		

Original Amount of Loan 12000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 12000.00
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**TERMS**

Date Incurred MM / DD / YYYY 10 / 21 / 2015	Date Due MM / DD / YYYY	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional) .....	▶	[ ] 12000.00
<b>TOTALS</b> 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.

**SCHEDULE C (FEC Form 3X)**

**LOANS**

NAME OF COMMITTEE (In Full) **COURAGEOUS CONSERVATIVES PAC** Transaction ID : **SC/10.4281**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Ekstrom, Christopher, , ,			<input checked="" type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 25 Highland Park Village Suite 100				
City Dallas	State TX	ZIP Code 75205		

Original Amount of Loan 15000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 15000.00
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**TERMS**

Date Incurred MM / DD / YYYY 11 / 05 / 2015	Date Due MM / DD / YYYY	Interest Rate % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional) .....	▶	[ ] 15000.00
<b>TOTALS</b> 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.

**SCHEDULE C (FEC Form 3X)**

**LOANS**

NAME OF COMMITTEE (In Full) **COURAGEOUS CONSERVATIVES PAC** Transaction ID : **SC/10.4283**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Ekstrom, Christopher, , ,		<input checked="" type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 25 Highland Park Village Suite 100			
City Dallas	State TX	ZIP Code 75205	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
30000.00	0.00	30000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
MM / DD / YYYY 11 / 17 / 2015	MM / DD / YYYY	% (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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:

<b>SUBTOTALS</b> This Period This Page (optional) .....	30000.00
<b>TOTALS</b> 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.

**SCHEDULE C (FEC Form 3X)**

**LOANS**

NAME OF COMMITTEE (In Full) **COURAGEOUS CONSERVATIVES PAC** Transaction ID : **SC/10.4404**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Ekstrom, Christopher, , ,		<input checked="" type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 25 Highland Park Village Suite 100			
City Dallas	State TX	ZIP Code 75205	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
6500.00	0.00	6500.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
MM / DD / YYYY 01 / 05 / 2016	MM / DD / YYYY 11/8/16	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional) .....	6500.00
<b>TOTALS</b> 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.

**SCHEDULE C (FEC Form 3X)**

**LOANS**

NAME OF COMMITTEE (In Full) **COURAGEOUS CONSERVATIVES PAC** Transaction ID : **SC/10.4405**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Ekstrom, Christopher, , ,			<input checked="" type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 25 Highland Park Village Suite 100				
City Dallas	State TX	ZIP Code 75205		

Original Amount of Loan 20000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 20000.00
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**TERMS**

Date Incurred MM / DD / YYYY 01 / 22 / 2016	Date Due MM / DD / YYYY 11/8/16	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional) .....	▶	[ ] 20000.00
<b>TOTALS</b> 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.

**SCHEDULE C (FEC Form 3X)**

**LOANS**

NAME OF COMMITTEE (In Full) **COURAGEOUS CONSERVATIVES PAC** Transaction ID : **SC/10.4406**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Ekstrom, Christopher, , ,			<input checked="" type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 25 Highland Park Village Suite 100				
City Dallas	State TX	ZIP Code 75205		

Original Amount of Loan 8000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 8000.00
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**TERMS**

Date Incurred MM / DD / YYYY 01 / 25 / 2016	Date Due MM / DD / YYYY 11/8/16	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional) .....	▶	8000.00
<b>TOTALS</b> 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.



**SCHEDULE C (FEC Form 3X)**

**LOANS**

NAME OF COMMITTEE (In Full) **COURAGEOUS CONSERVATIVES PAC** Transaction ID : **SC/10.4500**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Ekstrom, Christopher, , ,			<input checked="" type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 25 Highland Park Village Suite 100				
City Dallas	State TX	ZIP Code 75205		

Original Amount of Loan 8500.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 8500.00
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**TERMS**

Date Incurred MM / DD / YYYY 02 / 03 / 2016	Date Due MM / DD / YYYY	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional) .....	▶	8500.00
<b>TOTALS</b> 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.

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **COURAGEOUS CONSERVATIVES PAC** Transaction ID : **SC/10.4505**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Ekstrom, Christopher, , ,			<input checked="" type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 25 Highland Park Village Suite 100				
City Dallas	State TX	ZIP Code 75205		

Original Amount of Loan 30000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 30000.00
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**TERMS**

Date Incurred MM / DD / YYYY 02 / 12 / 2016	Date Due MM / DD / YYYY	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional) .....	▶	[ ] 30000.00
<b>TOTALS</b> 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.

**SCHEDULE C (FEC Form 3X)**

**LOANS**

NAME OF COMMITTEE (In Full) **COURAGEOUS CONSERVATIVES PAC** Transaction ID : **SC/10.4510**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Ekstrom, Christopher, , ,			<input checked="" type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 25 Highland Park Village Suite 100				
City Dallas	State TX	ZIP Code 75205		

Original Amount of Loan 17000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 17000.00
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**TERMS**

Date Incurred MM / DD / YYYY 02 / 22 / 2016	Date Due MM / DD / YYYY	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional) .....	▶	[ ] 17000.00
<b>TOTALS</b> 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.

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **COURAGEOUS CONSERVATIVES PAC** Transaction ID : **SC/10.4555**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Ekstrom, Christopher, , ,			<input checked="" type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 25 Highland Park Village Suite 100				
City Dallas	State TX	ZIP Code 75205		

Original Amount of Loan 10000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 10000.00
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**TERMS**

Date Incurred MM / DD / YYYY 03 / 18 / 2016	Date Due MM / DD / YYYY	Interest Rate % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional) .....	▶	[ ] 10000.00
<b>TOTALS</b> 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.

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **COURAGEOUS CONSERVATIVES PAC** Transaction ID : **SC/10.4892**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Ekstrom, Christopher, , ,			<input checked="" type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 25 Highland Park Village Suite 100				
City Dallas	State TX	ZIP Code 75205		

Original Amount of Loan 4567.89	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 4567.89
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**TERMS**

Date Incurred MM / DD / YYYY 07 / 01 / 2016	Date Due MM / DD / YYYY	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional) .....	▶	[ ] 4567.89
<b>TOTALS</b> 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.

**SCHEDULE C (FEC Form 3X)**

**LOANS**

NAME OF COMMITTEE (In Full) **COURAGEOUS CONSERVATIVES PAC** Transaction ID : **SC/10.4891**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Ekstrom, Christopher, , ,		<input checked="" type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 25 Highland Park Village Suite 100			
City Dallas	State TX	ZIP Code 75205	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
6000.00	0.00	6000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
MM / DD / YYYY 07 / 11 / 2016	MM / DD / YYYY	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional) .....	6000.00
<b>TOTALS</b> 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.

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **COURAGEOUS CONSERVATIVES PAC** Transaction ID : **SC/10.4918**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Ekstrom, Christopher, , ,			<input checked="" type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 25 Highland Park Village Suite 100				
City	State	ZIP Code		
Dallas	TX	75205		

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
10013.46	0.00	10013.46

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
MM / DD / YYYY 08 / 04 / 2016	MM / DD / YYYY 12/31/2020	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional) .....	▶	10013.46
<b>TOTALS</b> 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.

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **COURAGEOUS CONSERVATIVES PAC** Transaction ID : **SC/10.4934**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Ekstrom, Christopher, , ,			<input checked="" type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 25 Highland Park Village Suite 100				
City Dallas	State TX	ZIP Code 75205		

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
9500.00	0.00	9500.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
MM / DD / YYYY 09 / 19 / 2016	MM / DD / YYYY 12/31/2020	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional) .....	9500.00
<b>TOTALS</b> 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.



**SCHEDULE C (FEC Form 3X)**

**LOANS**

NAME OF COMMITTEE (In Full) **COURAGEOUS CONSERVATIVES PAC** Transaction ID : **SC/10.4948**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Ekstrom, Christopher, , ,			<input checked="" type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 25 Highland Park Village Suite 100				
City Dallas	State TX	ZIP Code 75205		

Original Amount of Loan 15420.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 15420.00
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**TERMS**

Date Incurred MM / DD / YYYY 11 / 16 / 2016	Date Due MM / DD / YYYY 12/31/2020	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional) .....	▶	[ ] 15420.00
<b>TOTALS</b> 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.		

**SCHEDULE C (FEC Form 3X)**

**LOANS**

NAME OF COMMITTEE (In Full) **COURAGEOUS CONSERVATIVES PAC** Transaction ID : **SC/10.4995**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Ekstrom, Christopher, , ,			<input checked="" type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 25 Highland Park Village Suite 100				
City Dallas	State TX	ZIP Code 75205		

Original Amount of Loan 12500.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 12500.00
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**TERMS**

Date Incurred MM / DD / YYYY 08 / 07 / 2017	Date Due MM / DD / YYYY 12/31/2021	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional) .....	▶	[ ] 12500.00
<b>TOTALS</b> 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.

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **COURAGEOUS CONSERVATIVES PAC** Transaction ID : **SC/10.4996**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Ekstrom, Christopher, , , <input checked="" type="checkbox"/> Memo Item			Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 25 Highland Park Village Suite 100			
City Dallas	State TX	ZIP Code 75205	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
300.00	0.00	300.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
MM / DD / YYYY 08 / 31 / 2017	MM / DD / YYYY 12/31/2021	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: [ ]		

<b>SUBTOTALS</b> This Period This Page (optional) .....	▶	300.00
<b>TOTALS</b> 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.

**SCHEDULE C (FEC Form 3X)**

**LOANS**

NAME OF COMMITTEE (In Full) **COURAGEOUS CONSERVATIVES PAC** Transaction ID : **SC/10.5028**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Ekstrom, Christopher, , ,		<input checked="" type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 25 Highland Park Village Suite 100			
City Dallas	State TX	ZIP Code 75205	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5014.97	0.00	5014.97

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
MM / DD / YYYY 09 / 01 / 2017	MM / DD / YYYY 12/31/2017	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional) .....	5014.97
<b>TOTALS</b> 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.

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **COURAGEOUS CONSERVATIVES PAC** Transaction ID : **SC/10.5068**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Ekstrom, Christopher, , ,			<input checked="" type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 25 Highland Park Village Suite 100				
City Dallas	State TX	ZIP Code 75205		

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
11000.00	0.00	11000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
MM / DD / YYYY 10 / 16 / 2017	MM / DD / YYYY 12/31/2021	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional) .....	11000.00
<b>TOTALS</b> 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.

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **COURAGEOUS CONSERVATIVES PAC** Transaction ID : **SC/10.5091**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Ekstrom, Christopher, , ,			<input checked="" type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 25 Highland Park Village Suite 100				
City Dallas	State TX	ZIP Code 75205		

Original Amount of Loan 750.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 750.00
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**TERMS**

Date Incurred MM / DD / YYYY 11 / 10 / 2017	Date Due MM / DD / YYYY 12/31/2022	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional) .....	▶	[ ] 750.00
<b>TOTALS</b> 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.		

**SCHEDULE C (FEC Form 3X)**

**LOANS**

NAME OF COMMITTEE (In Full) **COURAGEOUS CONSERVATIVES PAC** Transaction ID : **SC/10.5104**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Ekstrom, Christopher, , ,			<input checked="" type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 25 Highland Park Village Suite 100				
City Dallas	State TX	ZIP Code 75205		

Original Amount of Loan 22185.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 22185.00
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**TERMS**

Date Incurred MM / DD / YYYY 12 / 01 / 2017	Date Due MM / DD / YYYY 12/31/2021	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional) .....	▶	22185.00
<b>TOTALS</b> 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.

**SCHEDULE C (FEC Form 3X)**

**LOANS**

NAME OF COMMITTEE (In Full) **COURAGEOUS CONSERVATIVES PAC** Transaction ID : **SC/10.5102**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Ekstrom, Christopher, , ,			<input checked="" type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 25 Highland Park Village Suite 100				
City Dallas	State TX	ZIP Code 75205		

Original Amount of Loan 5000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 5000.00
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**TERMS**

Date Incurred MM / DD / YYYY 12 / 06 / 2017	Date Due MM / DD / YYYY 12/31/2021	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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: [ ]		

<b>SUBTOTALS</b> This Period This Page (optional) .....	▶	5000.00
<b>TOTALS</b> 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.



**SCHEDULE C (FEC Form 3X)**

**LOANS**

NAME OF COMMITTEE (In Full) **COURAGEOUS CONSERVATIVES PAC** Transaction ID : **SC/10.5103**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Ekstrom, Christopher, , ,			<input checked="" type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 25 Highland Park Village Suite 100				
City Dallas	State TX	ZIP Code 75205		

Original Amount of Loan 6500.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 6500.00
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**TERMS**

Date Incurred MM / DD / YYYY 12 / 18 / 2017	Date Due MM / DD / YYYY 12/31/2021	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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: [ ]		

<b>SUBTOTALS</b> This Period This Page (optional) .....	▶	[ ] 6500.00
<b>TOTALS</b> 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.

**SCHEDULE C (FEC Form 3X)**

**LOANS**

NAME OF COMMITTEE (In Full) **COURAGEOUS CONSERVATIVES PAC** Transaction ID : **SC/10.5146**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Ekstrom, Christopher, , ,			<input checked="" type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 25 Highland Park Village Suite 100				
City Dallas	State TX	ZIP Code 75205		

Original Amount of Loan 500.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 500.00
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**TERMS**

Date Incurred MM / DD / YYYY 04 / 14 / 2018	Date Due MM / DD / YYYY 12/31/2025	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional) .....	▶	500.00
<b>TOTALS</b> 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.

**SCHEDULE C (FEC Form 3X)**

**LOANS**

NAME OF COMMITTEE (In Full) **COURAGEOUS CONSERVATIVES PAC** Transaction ID : **SC/10.5187**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Ekstrom, Christopher, , ,		<input checked="" type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 25 Highland Park Village Suite 100			
City Dallas	State TX	ZIP Code 75205	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
22000.00	0.00	22000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
MM / DD / YYYY 05 / 11 / 2018	MM / DD / YYYY 12/31/2022	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional) .....	22000.00
<b>TOTALS</b> 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.

**SCHEDULE C (FEC Form 3X)**

**LOANS**

NAME OF COMMITTEE (In Full) **COURAGEOUS CONSERVATIVES PAC** Transaction ID : **SC/10.5243**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Ekstrom, Christopher, , ,			<input checked="" type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 25 Highland Park Village Suite 100				
City Dallas	State TX	ZIP Code 75205		

Original Amount of Loan 6000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 6000.00
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**TERMS**

Date Incurred MM / DD / YYYY 06 / 08 / 2018	Date Due MM / DD / YYYY 12/31/2020	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional) .....	▶	6000.00
<b>TOTALS</b> This Period (last page in this line only) .....	▶	294251.32

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
COURAGEOUS CONSERVATIVES PAC
FEC IDENTIFICATION NUMBER
C C00587022

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

Full Name of Payee Atlantic Media
Mailing Address Box 297
City Rodanthe State NC Zip Code 27968
Purpose of Expenditure Advertising
Category/Type

Date of Public Distribution/Dissemination 06/01/2018
Amount 7454.40
Transaction ID : SE.5158
Date of Disbursement or Obligation 06/01/2018

Name of Federal Candidate: COMSTOCK, BARBARA, ,
Support Oppose
Calendar Year-To-Date Per Election for Office Sought 25104.40

Office Sought: House District: 10
President Senate State: VA
Disbursement For: Primary General 2018
Other (specify)

Full Name of Payee Atlantic Media
Mailing Address Box 297
City Rodanthe State NC Zip Code 27968
Purpose of Expenditure Advertising
Category/Type

Date of Public Distribution/Dissemination 06/01/2018
Amount 1863.60
Transaction ID : SE.5160
Date of Disbursement or Obligation 06/01/2018

Name of Federal Candidate: HILL, SHAK, ,
Support Oppose
Calendar Year-To-Date Per Election for Office Sought 26968.00

Office Sought: House District: 10
President Senate State: VA
Disbursement For: Primary General 2018
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 9318.00
(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.

Fahy, Amanda, ,
Signature

[Electronically Filed]

Date 07/20/2018

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

NAME OF COMMITTEE (In Full) <b>COURAGEOUS CONSERVATIVES PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.5em; font-weight: bold; margin-right: 5px;">C</span> C00587022                 </div>
--	---

Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>Atlantic Media</b>	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 06 / 08 / 2018			
Mailing Address <b>Box 297</b>	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                     12861.75                 </div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City Rodanthe</td> <td style="width:17%; padding: 2px;">State NC</td> <td style="width:50%; padding: 2px;">Zip Code 27968</td> </tr> </table>		City Rodanthe	State NC	Zip Code 27968
City Rodanthe		State NC	Zip Code 27968	
Purpose of Expenditure Advertising				
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose COMSTOCK, BARBARA, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>10</u> State: <u>VA</u>			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                     39829.75                 </div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____			

Full Name of Payee <input type="checkbox"/> Memo Item <b>Atlantic Media</b>	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 06 / 08 / 2018			
Mailing Address <b>Box 297</b>	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                     4287.25                 </div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City Rodanthe</td> <td style="width:17%; padding: 2px;">State NC</td> <td style="width:50%; padding: 2px;">Zip Code 27968</td> </tr> </table>		City Rodanthe	State NC	Zip Code 27968
City Rodanthe		State NC	Zip Code 27968	
Purpose of Expenditure Advertising				
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose HILL, SHAK, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>10</u> State: <u>VA</u>			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                     44117.00                 </div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____			

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                 17149.00             </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                 _____             </div>
<b>(c) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                 _____             </div>

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.

*Fahy, Amanda, , ,*

*[Electronically Filed]*

Date M M / D D / Y Y Y Y Y Y  
 07 / 20 / 2018

Signature

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

NAME OF COMMITTEE (In Full) <b>COURAGEOUS CONSERVATIVES PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold; border: 1px solid black; padding: 2px;">C</span> C00587022             </div>
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Check if  24-hour report  48-hour report ➤  New report  Amends report filed on MM / DD / YYYY

Full Name of Payee <input type="checkbox"/> Memo Item <b>Atlantic Media</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 06 / 11 / 2018			
Mailing Address <b>Box 297</b>	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold;">4644.80</span> </div>			
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City Rodanthe</td> <td style="width:17%;">State NC</td> <td style="width:50%;">Zip Code 27968</td> </tr> </table>		City Rodanthe	State NC	Zip Code 27968
City Rodanthe		State NC	Zip Code 27968	
Purpose of Expenditure Advertising				
Name of Federal Candidate: COMSTOCK, BARBARA, , ,	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 10 State: VA			
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			

48761.80

Full Name of Payee <input type="checkbox"/> Memo Item <b>Atlantic Media</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 06 / 11 / 2018			
Mailing Address <b>Box 297</b>	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold;">1161.20</span> </div>			
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City Rodanthe</td> <td style="width:17%;">State NC</td> <td style="width:50%;">Zip Code 27968</td> </tr> </table>		City Rodanthe	State NC	Zip Code 27968
City Rodanthe		State NC	Zip Code 27968	
Purpose of Expenditure Advertising				
Name of Federal Candidate: HILL, SHAK, , ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 10 State: VA			
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			

49923.00

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold;">5806.00</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold;">0.00</span> </div>
<b>(c) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold;">32273.00</span> </div>

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.

*Fahy, Amanda, , ,*

*[Electronically Filed]*

Date MM / DD / YYYY  
07 / 20 / 2018

Signature