

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**  
**COURAGEOUS CONSERVATIVES PAC**

ADDRESS (number and street) **212 Yeardeley Ave**  
Check if different than previously reported. (ACC) **Lynchburg VA 24501**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00587022** 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  **11** /  **06** /  **2018** in the State of

5. Covering Period  **10** /  **18** /  **2018** through  **11** /  **26** /  **2018**

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Fahy, Amanda, , ,  
Type or Print Name of Treasurer

Signature of Treasurer Fahy, Amanda, , , [Electronically Filed] Date  **03** /  **18** /  **2019**

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**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="121589.57"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="106180.00"/>	<input type="text" value="410952.00"/>
(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="227769.57"/>	<input type="text" value="413462.43"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="178890.38"/>	<input type="text" value="364583.24"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="48879.19"/>	<input type="text" value="48879.19"/>
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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**COURAGEOUS CONSERVATIVES PAC**

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 18 / 2018 To: M M / D D / Y Y Y Y 11 / 26 / 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).....	105700.00	378700.00
(ii) Unitemized .....	480.00	3752.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	106180.00	382452.00
(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) .....	106180.00	382452.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	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)).....▶	106180.00	410952.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	106180.00	410952.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	8016.04	23852.61
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	8016.04	23852.61
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) .....	170874.34	340730.63
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)) ..	178890.38	364583.24
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	178890.38	364583.24

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<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) .....	106180.00	382452.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	106180.00	382452.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	8016.04	23852.61
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	8016.04	23852.61

**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 51
<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. Gelman, Lawrence, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3900 Sundown Dr  
 City Mcallen State TX Zip Code 78503  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) McAllen Anes Consultants Occupation (for Individual) Physician  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 31 / 2018  
**Transaction ID : SA11AI.5691**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. Hayden, Rufus, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 508 N Hidalgo Ave  
 City Alhambra State CA Zip Code 91801  
 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 11 / 07 / 2018  
**Transaction ID : SA11AI.5669**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item

**C. Hillman, Tatnall, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 504 W Bleeker St  
 City Aspen State CO Zip Code 81611  
 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 ▼ 275000.00

Date of Receipt 10 / 23 / 2018  
**Transaction ID : SA11AI.5668**  
 Amount of Each Receipt this Period 50000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	53000.00
<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 51
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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. Hillman, Tatnall, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 504 W Bleeker St  
 City Aspen State CO Zip Code 81611  
 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 ▼ 325000.00

Date of Receipt 11 / 05 / 2018  
**Transaction ID : SA11AI.5671**  
 Amount of Each Receipt this Period 50000.00  
 Memo Item

**B. Pope, Bill, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 307 E Whaley  
 City Longview State TX Zip Code 75601  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NCIC Inmate Communications Occupation (for Individual) Law Enforcement  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 11 / 01 / 2018  
**Transaction ID : SA11AI.5693**  
 Amount of Each Receipt this Period 2700.00  
 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  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	52700.00
<b>TOTAL</b> This Period (last page this line number only).....	105700.00

**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

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. C&H Financial Services**

Full Name (Last, First, Middle Initial)

Mailing Address 1 Westbrook Corporate Center  
Ste 300

City Westchester State IL Zip Code 60154

Purpose of Disbursement Bank Fee

Candidate Name **COURAGEOUS CONSERVATIVES PAC**

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

State: District:

Date of Disbursement 11 / 02 / 2018

FEC Identification Number C00587022  
**Transaction ID : SB21B.5652**

Amount of Each Disbursement this Period 50.85

Memo Item

**B. C&H Financial Services**

Full Name (Last, First, Middle Initial)

Mailing Address 1 Westbrook Corporate Center  
Ste 300

City Westchester State IL Zip Code 60154

Purpose of Disbursement Bank Card Fees

Candidate Name **COURAGEOUS CONSERVATIVES PAC**

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

State: District:

Date of Disbursement 11 / 06 / 2018

FEC Identification Number C00587022  
**Transaction ID : SB21B.5654**

Amount of Each Disbursement this Period 20.00

Memo Item

**C. Ekstrom, Christopher, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 25 Highland Park Village  
Suite 100

City Dallas State TX Zip Code 75205

Purpose of Disbursement Reimbursement: Travel for Conference

Candidate Name **COURAGEOUS CONSERVATIVES PAC**

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

State: District:

Date of Disbursement 11 / 02 / 2018

FEC Identification Number C00587022  
**Transaction ID : SB21B.5649**

Amount of Each Disbursement this Period 2092.54

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2163.39

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

**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

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**

Full Name (Last, First, Middle Initial)

**A. Facebook**

Mailing Address 1 Hacker Way

City Menlo Park State CA Zip Code 94025

Purpose of Disbursement  
Social Media

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  
11 / 06 / 2018

FEC Identification Number

C C00587022

Transaction ID : SB21B.5660

Amount of Each Disbursement this Period

2700.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Fahy, Amanda, , ,**

Mailing Address 212 Yeardeley Ave

City Lynchbug State VA Zip Code 24501

Purpose of Disbursement  
Treasury 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  
10 / 22 / 2018

FEC Identification Number

C C00587022

Transaction ID : SB21B.5643

Amount of Each Disbursement this Period

862.55

Memo Item

Full Name (Last, First, Middle Initial)

**C. Rose, Norvell, , ,**

Mailing Address 3288 Doncaster Rd

City Virginia Beach State VA Zip Code 23452

Purpose of Disbursement  
TV Buy

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  
11 / 19 / 2018

FEC Identification Number

C C00587022

Transaction ID : SB21B.5665

Amount of Each Disbursement this Period

1250.00

Memo Item

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

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

4812.55

**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

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**

Full Name (Last, First, Middle Initial)

**A. Stripe**

Mailing Address 185 Berry St  
#550

City San Francisco State CA Zip Code 94107

Purpose of Disbursement  
CC 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  
11 / 26 / 2018

FEC Identification Number

**C** C00587022

**Transaction ID : SB21B.5695**

Amount of Each Disbursement this Period

315.10

Memo Item

Full Name (Last, First, Middle Initial)

**B. Wells Fargo**

Mailing Address Rt. 70

City Medford State NJ Zip Code 08055

Purpose of Disbursement  
Wire 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  
10 / 19 / 2018

FEC Identification Number

**C** C00587022

**Transaction ID : SB21B.5642**

Amount of Each Disbursement this Period

30.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Wells Fargo**

Mailing Address Rt. 70

City Medford State NJ Zip Code 08055

Purpose of Disbursement  
Wire 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  
10 / 22 / 2018

FEC Identification Number

**C** C00587022

**Transaction ID : SB21B.5644**

Amount of Each Disbursement this Period

30.00

Memo Item

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

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

375.10

**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

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**

Full Name (Last, First, Middle Initial)

**A. Wells Fargo**

Mailing Address Rt. 70

City Medford State NJ Zip Code 08055

Purpose of Disbursement  
Wire 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  
10 / 23 / 2018

FEC Identification Number

**C** C00587022

**Transaction ID : SB21B.5645**

Amount of Each Disbursement this Period

15.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Wells Fargo**

Mailing Address Rt. 70

City Medford State NJ Zip Code 08055

Purpose of Disbursement  
Wire 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  
10 / 26 / 2018

FEC Identification Number

**C** C00587022

**Transaction ID : SB21B.5647**

Amount of Each Disbursement this Period

30.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Wells Fargo**

Mailing Address Rt. 70

City Medford State NJ Zip Code 08055

Purpose of Disbursement  
Wire 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  
10 / 30 / 2018

FEC Identification Number

**C** C00587022

**Transaction ID : SB21B.5648**

Amount of Each Disbursement this Period

30.00

Memo Item

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

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

75.00

**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

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**

Full Name (Last, First, Middle Initial)

**A. Wells Fargo**

Mailing Address Rt. 70

City Medford State NJ Zip Code 08055

Purpose of Disbursement  
Wire 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  
11 / 02 / 2018

FEC Identification Number

**C** C00587022

**Transaction ID : SB21B.5650**

Amount of Each Disbursement this Period

30.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Wells Fargo**

Mailing Address Rt. 70

City Medford State NJ Zip Code 08055

Purpose of Disbursement  
Wire 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  
11 / 02 / 2018

FEC Identification Number

**C** C00587022

**Transaction ID : SB21B.5651**

Amount of Each Disbursement this Period

30.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Wells Fargo**

Mailing Address Rt. 70

City Medford State NJ Zip Code 08055

Purpose of Disbursement  
Wire 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  
11 / 05 / 2018

FEC Identification Number

**C** C00587022

**Transaction ID : SB21B.5655**

Amount of Each Disbursement this Period

30.00

Memo Item

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

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

90.00

**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

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**

Full Name (Last, First, Middle Initial)

**A. Wells Fargo**

Mailing Address Rt. 70

City Medford State NJ Zip Code 08055

Purpose of Disbursement  
Wire 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  
11 / 05 / 2018

FEC Identification Number

**C** C00587022

**Transaction ID : SB21B.5656**

Amount of Each Disbursement this Period

30.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Wells Fargo**

Mailing Address Rt. 70

City Medford State NJ Zip Code 08055

Purpose of Disbursement  
Wire 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  
11 / 05 / 2018

FEC Identification Number

**C** C00587022

**Transaction ID : SB21B.5657**

Amount of Each Disbursement this Period

30.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Wells Fargo**

Mailing Address Rt. 70

City Medford State NJ Zip Code 08055

Purpose of Disbursement  
Wire 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  
11 / 05 / 2018

FEC Identification Number

**C** C00587022

**Transaction ID : SB21B.5659**

Amount of Each Disbursement this Period

15.00

Memo Item

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

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

75.00



**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
-------------------------------------	------------------------------------	---

**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
---	----------------------------	-------------------------------	---

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
-------------------------------------	------------------------------------	---

**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
---	----------------------------	--------------------------	---

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 30000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 30000.00
-------------------------------------	------------------------------------	---

**TERMS**

Date Incurred MM / DD / YYYY 11 / 17 / 2015	Date Due MM / DD / YYYY	Interest Rate % (apr)	Secured: <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 6500.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 6500.00
------------------------------------	------------------------------------	--

**TERMS**

Date Incurred MM / DD / YYYY 01 / 05 / 2016	Date Due MM / DD / YYYY 11/8/16	Interest Rate 0.00 % (apr)	Secured: <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	Cumulative Payment To Date	Balance Outstanding at Close of This Period
20000.00	0.00	20000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
MM / DD / YYYY 01 / 22 / 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) .....	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
------------------------------------	------------------------------------	--

**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
---	---------------------------------------	-------------------------------	---

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
------------------------------------	------------------------------------	--

**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
---	----------------------------	-------------------------------	---

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	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 02 / 12 / 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) .....	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, , ,			<b>N</b> <input 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
-------------------------------------	------------------------------------	---

**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
---	----------------------------	-------------------------------	---

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
-------------------------------------	------------------------------------	---

**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
---	----------------------------	--------------------------	---

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
------------------------------------	------------------------------------	--

**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
---	----------------------------	-------------------------------	---

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 6000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 6000.00
------------------------------------	------------------------------------	--

**TERMS**

Date Incurred MM / DD / YYYY 07 / 11 / 2016	Date Due MM / DD / YYYY	Interest Rate 0.00 % (apr)	Secured: <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 Dallas	State TX	ZIP Code 75205		

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

**TERMS**

Date Incurred MM / DD / YYYY 08 / 04 / 2016	Date Due MM / DD / YYYY 12/31/2020	Interest Rate 0.00 % (apr)	Secured: <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 9500.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 9500.00
------------------------------------	------------------------------------	--

**TERMS**

Date Incurred MM / DD / YYYY 09 / 19 / 2016	Date Due MM / DD / YYYY 12/31/2020	Interest Rate 0.00 % (apr)	Secured: <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
-------------------------------------	------------------------------------	---

**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
---	--	-------------------------------	---

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	Cumulative Payment To Date	Balance Outstanding at Close of This Period
12500.00	0.00	12500.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
MM / DD / YYYY 08 / 07 / 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) .....	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 300.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 300.00
-----------------------------------	------------------------------------	---

**TERMS**

Date Incurred MM / DD / YYYY 08 / 31 / 2017	Date Due MM / DD / YYYY 12/31/2021	Interest Rate 0.00 % (apr)	Secured: <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	Cumulative Payment To Date	Balance Outstanding at Close of This Period
750.00	0.00	750.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
MM / DD / YYYY 11 / 10 / 2017	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) .....	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	Cumulative Payment To Date	Balance Outstanding at Close of This Period
22185.00	0.00	22185.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
MM / DD / YYYY 12 / 01 / 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) .....	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	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5000.00	0.00	5000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
MM / DD / YYYY 12 / 06 / 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) .....	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
------------------------------------	------------------------------------	--

**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
---	--	-------------------------------	---

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	Cumulative Payment To Date	Balance Outstanding at Close of This Period
500.00	0.00	500.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
MM / DD / YYYY 04 / 14 / 2018	MM / DD / YYYY 12/31/2025	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: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional) .....	500.00
<b>TOTALS</b> This Period (last page in this line only) .....	<input type="text"/>

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 22000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 22000.00
-------------------------------------	------------------------------------	---

**TERMS**

Date Incurred MM / DD / YYYY 05 / 11 / 2018	Date Due MM / DD / YYYY 12/31/2022	Interest Rate 0.00 % (apr)	Secured: <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
------------------------------------	------------------------------------	--

**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
---	--	-------------------------------	---

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: American Campaign Services, LLC
Mailing Address: 5830 E 2nd St Ste 8
City: Casper State: WY Zip Code: 82609
Purpose of Expenditure: RoboCalls
Date of Public Distribution/Dissemination: 11/01/2019
Amount: 5000.00
Transaction ID: SE.5850
Date of Disbursement or Obligation: 11/01/2018
Name of Federal Candidate: ROGERS, WENDY, , ,
Support: [X] Oppose: [ ]
Office Sought: [X] House District: 01 State: AZ
Disbursement For: [ ] Primary [X] General 2018

Full Name of Payee: American Campaign Services, LLC
Mailing Address: 5830 E 2nd St Ste 8
City: Casper State: WY Zip Code: 82609
Purpose of Expenditure: Text Messages
Date of Public Distribution/Dissemination: 11/03/2018
Amount: 20000.00
Transaction ID: SE.5618
Date of Disbursement or Obligation: 11/03/2018
Name of Federal Candidate: ROGERS, WENDY, , ,
Support: [X] Oppose: [ ]
Office Sought: [X] House District: 01 State: AZ
Disbursement For: [ ] Primary [X] General 2018

(a) SUBTOTAL of Itemized Independent Expenditures ..... 25000.00
(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 03/18/2019

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 Media Buy
Name of Federal Candidate: FINKENAUER, ABBY, , ,
Office Sought: House District: 01 State: IA
Disbursement For: General 2018
Amount 10762.50
Transaction ID: SE.5609

Full Name of Payee Atlantic Media
Mailing Address Box 297
City Rodanthe State NC Zip Code 27968
Purpose of Expenditure Radio Buy
Name of Federal Candidate: FINKENAUER, ABBY, , ,
Office Sought: House District: 01 State: IA
Disbursement For: General 2018
Amount 5558.00
Transaction ID: SE.5611

(a) SUBTOTAL of Itemized Independent Expenditures 16320.50
(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, , ,

[Electronically Filed]

Date 03 / 18 / 2019

Signature

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 Media Buy
Name of Federal Candidate: BLUM, RODNEY, , ,
Calendar Year-To-Date Per Election for Office Sought 19908.00
Disbursement For: General 2018

Full Name of Payee Atlantic Media
Mailing Address Box 297
City Rodanthe State NC Zip Code 27968
Purpose of Expenditure Media Buy
Name of Federal Candidate: FINKENAUER, ABBY, , ,
Calendar Year-To-Date Per Election for Office Sought 24908.00
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 8587.50
(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, , ,

[Electronically Filed]

Date 03 / 18 / 2019

Signature

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: Cox Media
Mailing Address: 4600 E Washington Ste 200
City: Phoenix State: AZ Zip Code: 85034
Purpose of Expenditure: Media Buy
Date of Public Distribution/Dissemination: 10/26/2018
Amount: 17565.00
Transaction ID: SE.5594
Date of Disbursement or Obligation: 10/26/2018

Name of Federal Candidate: ROGERS, WENDY, , ,
Support: [X] Oppose: [ ]
Office Sought: House [X] Senate [ ] President [ ]
District: 01 State: AZ
Calendar Year-To-Date Per Election for Office Sought: 91896.96
Disbursement For: Primary [ ] General [X] Other (specify) [ ]

Full Name of Payee: Cox Media
Mailing Address: 4600 E Washington Ste 200
City: Phoenix State: AZ Zip Code: 85034
Purpose of Expenditure: Media Buy
Date of Public Distribution/Dissemination: 10/26/2018
Amount: 17565.00
Transaction ID: SE.5596
Date of Disbursement or Obligation: 10/26/2018

Name of Federal Candidate: O'HALLERAN, TOM, , ,
Support: [ ] Oppose: [X]
Office Sought: House [X] Senate [ ] President [ ]
District: 01 State: AZ
Calendar Year-To-Date Per Election for Office Sought: 109461.96
Disbursement For: Primary [ ] General [X] Other (specify) [ ]

(a) SUBTOTAL of Itemized Independent Expenditures ..... 35130.00
(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, , , [Electronically Filed]
Signature Date 03/18/2019

**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>Cox Media</b>	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</span> </div>
Mailing Address 4600 E Washington Ste 200	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</span> </div>
City Phoenix State AZ Zip Code 85034	Transaction ID : <b>SE.5631</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</span> </div>
Purpose of Expenditure Media Advertisement Category/Type <span style="border: 1px solid black; padding: 2px 10px;"> </span>	Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose ROGERS, WENDY, , , Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 01 State: AZ
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px 10px;"> </span> 174266.34	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item <b>Cox Media</b>	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</span> </div>
Mailing Address 4600 E Washington Ste 200	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</span> </div>
City Phoenix State AZ Zip Code 85034	Transaction ID : <b>SE.5632</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</span> </div>
Purpose of Expenditure Media Advertisements Category/Type <span style="border: 1px solid black; padding: 2px 10px;"> </span>	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose O'HALLERAN, TOM, , , Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 01 State: AZ
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px 10px;"> </span> 184266.34	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</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; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</span> </div>
(c) <b>TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</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 
M M / D D / Y Y Y Y Y Y

Signature

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 Cygnal, LLC
Mailing Address 200 Interstate Park Dr Ste 238
City Montgomery State AL Zip Code 36109
Purpose of Expenditure Text Messaging
Date of Public Distribution/Dissemination 11 / 03 / 2018
Amount 8000.00
Transaction ID : SE.5625
Date of Disbursement or Obligation 11 / 03 / 2018

Name of Federal Candidate: ROGERS, WENDY, , ,
Support Oppose
Office Sought: House District: 01
President Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought 162466.34
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee Facebook
Mailing Address 1 Hacker Way
City Menlo Park State CA Zip Code 94025
Purpose of Expenditure Digital Advertising
Date of Public Distribution/Dissemination 10 / 31 / 2018
Amount 235.00
Transaction ID : SE.5603
Date of Disbursement or Obligation 10 / 31 / 2018

Name of Federal Candidate: ROGERS, WENDY, , ,
Support Oppose
Office Sought: House District: 01
President Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought 116360.90
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 8235.00
(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, , , [Electronically Filed] Date 03 / 18 / 2019
Signature

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 Facebook
Mailing Address 1 Hacker Way
City Menlo Park State CA Zip Code 94025
Purpose of Expenditure Social Media
Date of Public Distribution/Dissemination 11/03/2018
Amount 1625.00
Transaction ID: SE.5619
Date of Disbursement or Obligation 11/03/2018

Name of Federal Candidate: ROGERS, WENDY, , ,
Support Oppose
Office Sought: House District: 01
President Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought 154235.90
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee Facebook
Mailing Address 1 Hacker Way
City Menlo Park State CA Zip Code 94025
Purpose of Expenditure Social Media Advertisement
Date of Public Distribution/Dissemination 11/05/2018
Amount 1800.00
Transaction ID: SE.5630
Date of Disbursement or Obligation 11/05/2018

Name of Federal Candidate: ROGERS, WENDY, , ,
Support Oppose
Office Sought: House District: 01
President Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought 164266.34
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 3425.00
(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 03/18/2019

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: Grenax Broadcasting II, LLC
Mailing Address: 112 E Rte 66
City: Flagstaff, State: AZ, Zip Code: 86001
Purpose of Expenditure: Radio Spot
Category/Type:
Date of Public Distribution/Dissemination: 10/19/2018
Amount: 1665.98
Transaction ID: SE.5369
Date of Disbursement or Obligation: 10/19/2018

Name of Federal Candidate: ROGERS, WENDY, , ,
Support: [X] Oppose: [ ]
Office Sought: [X] House [ ] President [ ] Senate [ ]
District: 01 State: AZ
Calendar Year-To-Date Per Election for Office Sought: 39965.98
Disbursement For: [ ] Primary [X] General 2018 [ ] Other (specify)

Full Name of Payee: Grenax Broadcasting II, LLC
Mailing Address: 112 E Rte 66
City: Flagstaff, State: AZ, Zip Code: 86001
Purpose of Expenditure: Radio Spot
Category/Type:
Date of Public Distribution/Dissemination: 10/23/2018
Amount: 1665.98
Transaction ID: SE.5406
Date of Disbursement or Obligation: 10/23/2018

Name of Federal Candidate: ROGERS, WENDY, , ,
Support: [X] Oppose: [ ]
Office Sought: [X] House [ ] President [ ] Senate [ ]
District: 01 State: AZ
Calendar Year-To-Date Per Election for Office Sought: 74331.96
Disbursement For: [ ] Primary [X] General 2018 [ ] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures: 3331.96
(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: 03/18/2019

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 Grenax Broadcasting II, LLC
Mailing Address 112 E Rte 66
City Flagstaff State AZ Zip Code 86001
Purpose of Expenditure Radio Buy Category/Type

Date of Public Distribution/Dissemination 10/30/2018
Amount 3331.96
Transaction ID: SE.5601
Date of Disbursement or Obligation 10/30/2018

Name of Federal Candidate: ROGERS, WENDY, , ,
Support Oppose
Calendar Year-To-Date Per Election for Office Sought 112793.92

Office Sought: House District: 01
State: AZ
Disbursement For: General 2018

Full Name of Payee Grenax Broadcasting II, LLC
Mailing Address 112 E Rte 66
City Flagstaff State AZ Zip Code 86001
Purpose of Expenditure Radio Buy Category/Type

Date of Public Distribution/Dissemination 10/31/2018
Amount 3331.98
Transaction ID: SE.5602
Date of Disbursement or Obligation 10/31/2018

Name of Federal Candidate: ROGERS, WENDY, , ,
Support Oppose
Calendar Year-To-Date Per Election for Office Sought 116125.90

Office Sought: House District: 01
State: AZ
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 6663.94
(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, , ,

[Electronically Filed]

Date 03/18/2019

Signature

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
Impact Strategies, LLC
Mailing Address
720 Deer Dr
City
Ruckersville
State
VA
Zip Code
22968
Purpose of Expenditure
Text Messaging
Category/Type

Date of Public Distribution/Dissemination
10 / 19 / 2018
Amount
12700.00
Transaction ID : SE.5371
Date of Disbursement or Obligation
10 / 19 / 2018

Name of Federal Candidate:
ROGERS, WENDY, , ,
Support
Oppose
Office Sought:
House
Senate
District: 01
State: AZ
Calendar Year-To-Date
Per Election for Office Sought
52665.98

Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
Majority Strategies, LLC
Mailing Address
12854 Kenan Dr
Ste 145
City
Jacksonville
State
FL
Zip Code
32258
Purpose of Expenditure
Text Messages
Category/Type

Date of Public Distribution/Dissemination
10 / 23 / 2018
Amount
20000.00
Transaction ID : SE.5402
Date of Disbursement or Obligation
10 / 23 / 2018

Name of Federal Candidate:
ROGERS, WENDY, , ,
Support
Oppose
Office Sought:
House
Senate
District: 01
State: AZ
Calendar Year-To-Date
Per Election for Office Sought
72665.98

Disbursement For:
Primary
General
Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 32700.00, (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, , ,

[Electronically Filed]

Date 03 / 18 / 2019

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: 24px; 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>Majority Strategies, LLC</b>			Date of Public Distribution/Dissemination <span style="font-size: 18px;">M M / D D / Y Y Y Y Y Y</span> 11 / 01 / 2019		
Mailing Address 12854 Kenan Dr Ste 145			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">                     11250.00                 </div>		
City Jacksonville	State FL	Zip Code 32258			
Purpose of Expenditure Robocalls		Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Transaction ID : <b>SE.5851</b> Date of Disbursement or Obligation <span style="font-size: 18px;">M M / D D / Y Y Y Y Y Y</span> 11 / 01 / 2018		
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose ROGERS, WENDY, , ,			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 01 State: AZ		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">132610.90</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <input type="checkbox"/> Memo Item <b>On Impact Strategies, LLC</b>			Date of Public Distribution/Dissemination <span style="font-size: 18px;">M M / D D / Y Y Y Y Y Y</span> 11 / 03 / 2018		
Mailing Address P.O. Box 155			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">                     230.44                 </div>		
City Ruckersville	State VA	Zip Code 22968			
Purpose of Expenditure Data		Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Transaction ID : <b>SE.5622</b> Date of Disbursement or Obligation <span style="font-size: 18px;">M M / D D / Y Y Y Y Y Y</span> 11 / 03 / 2018		
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose ROGERS, WENDY, , ,			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 01 State: AZ		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">154466.34</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <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: 100%;">11480.44</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> </div>
<b>(c) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">170874.34</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  
03 / 18 / 2019

Signature