

# Political Organization Report of Contributions and Expenditures

▶ See separate instructions.

**A** For the period beginning 01/01/2024 and ending 03/31/2024

**B** Check applicable box:  Initial report  Change of address  Amended report  Final report

**1** Name of organization: Conservatives in Action **Employer identification number:** 81 - 3093156

**2** Mailing address (P.O. box or number, street, and room or suite number)  
4521 PGA Blvd #214

**City or town, state, and ZIP code**  
Palm Beach Gardens, FL 33418

**3** E-mail address of organization: no@email **4** Date organization was formed: 07/05/2016

**5a** Name of custodian of records: Randy Nielsen **5b** Custodian's address: 4521 PGA Blvd #214, Palm Beach Gardens, FL 33418

**6a** Name of contact person: Randy Nielsen **6b** Contact person's address: 4521 PGA Blvd #214, Palm Beach Gardens, FL 33418

**7** Business address of organization (if different from mailing address shown above). Number, street, and room or suite number  
4521 PGA Blvd #214

**City or town, state, and ZIP code**  
Palm Beach Gardens, FL 33418

**8** Type of report (check only one box)

- First quarterly report (due by April 15)
- Second quarterly report (due by July 15)
- Third quarterly report (due by October 15)
- Year-end report (due by January 31)
- Mid-year report (Non-election year only-due by July 31)
- Monthly report for the month of: (due by the 20th day following the month shown above, except the December report, which is due by January 31)
- Pre-election report (due by the 12th or 15th day before the election)
  - (1) Type of election:
  - (2) Date of election:
  - (3) For the state of:
- Post-general election report (due by the 30th day after general election)
  - (1) Date of election:
  - (2) For the state of:

**9** Total amount of reported contributions (total from all attached Schedules A) ..... **9.** \$ 0

**10** Total amount of reported expenditures (total from all attached Schedules B) ..... **10.** \$ 5000

Under penalties of perjury, I declare that I have examined this report, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Randy Nielsen

04/15/2024

**Sign Here**



Signature of authorized official



Date

**Schedule A** Itemized Contributions

**Schedule B**   **Itemized Expenditures**

Schedule B

**Recipient's name, mailing address and ZIP code**

Randy Nielsen  
3510 SW Loriope Loop  
Palm City, FL 34990 -

**Name of recipient's employer**

Public Concepts

**Recipients's occupation**

Consultant

**Amount of Expenditure**

\$ 5000

**Date of expenditure**

02/29/2024

**Purpose of expenditure**

Consulting and Administration