

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
FEC MAIL CENTER
2015 APR 17 AM 9:06
Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

CONSERVATIVE NATIONAL COMMITTEE

ADDRESS (number and street)

PO BOX 101326

☐ Check it different
than previously
reported. (ACC)

ARLINGTON

VA

22210

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

000139097

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

MM / DD / YYYY

in the
State of

State

(d) 30-Day
POST-Election
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

MM / DD / YYYY

in the
State of

State

5. Covering Period

03 / 01 / 2015

through

03 / 31 / 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer RALPH J. GALLIANO

Signature of Treasurer

Ralph J. Galliano

Date

04 / 16 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only

FEC FORM 3X
Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

CONSERVATIVE NATIONAL COMMITTEE

Report Covering the Period:

From:

03 01 2015

To:

03 31 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <u>2015</u>		<u>0</u>
(b) Cash on Hand at Beginning of Reporting Period.....	<u>0</u>	<u>0</u>
(c) Total Receipts (from Line 19)	<u>0</u>	<u>0</u>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<u>0</u>	<u>0</u>
7. Total Disbursements (from Line 31)	<u>0</u>	<u>0</u>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<u>0</u>	<u>0</u>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<u>0</u>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<u>9493082</u>	



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. 06/2004)

Page 3

Write or Type Committee Name

CONSERVATIVE NATIONAL COMMITTEE

Report Covering the Period:

From:

03 / 01 / 2015

To:

03 / 31 / 2015

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).....

(ii) Unitemized

(iii) TOTAL (add
Lines 11(a)(i) and (ii))..... ▶

(b) Political Party Committees

(c) Other Political Committees
(such as PACs).....

(d) Total Contributions (add Lines
11(a)(iii), (b), and (c)) (Carry
Totals to Line 33, page 5)..... ▶

12. Transfers From Affiliated/Other
Party Committees.....

13. All Loans Received.....

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures
(Refunds, Rebates, etc.)
(Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made
to Federal Candidates and Other
Political Committees.....

17. Other Federal Receipts
(Dividends, Interest, etc.).....

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account
(from Schedule H3).....

(b) Levin Funds (from Schedule H5)

(c) Total Transfers (add 18(a) and 18(b))..

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

20. Total Federal Receipts
(subtract Line 18(c) from Line 19)..... ▶













Page 4

FE6AN026

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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

1141144244

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate
schedule(s)
for each
numbered line)

PAGE 1 OF 5

FOR LINE NUMBER:
(check only one)

9
10

NAME OF COMMITTEE (In Full)

CONSERVATIVE NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

OMEGA LIST COMPANY

Nature of Debt (Purpose):

LIST RENTAL

Mailing Address

1430 Springhill Road # 490

City

State

McLean VA

Zip Code

22102

Outstanding Balance Beginning This Period

192,693.9

Amount Incurred This Period

0

Payment This Period

0

Outstanding Balance at Close of This Period

192,693.9

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Bruce W. Eberle & Associates

Nature of Debt (Purpose):

Fundraising

Mailing Address

1430 Springhill Road # 490

City

State

McLean VA

Zip Code

22102

Outstanding Balance Beginning This Period

17,974.0

Amount Incurred This Period

0

Payment This Period

0

Outstanding Balance at Close of This Period

17,974.0

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

GRAPHICS

Nature of Debt (Purpose):

Graphics

Mailing Address

8330 Old Courthouse Road

City

State

Zip Code

Outstanding Balance Beginning This Period

39,156

Amount Incurred This Period

0

Payment This Period

0

Outstanding Balance at Close of This Period

39,156

1) SUBTOTALS This Period This Page (optional)..... ▶

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

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... ▶

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

214,583.5

11-14-2003

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate
schedule(s)
for each
numbered line)

PAGE **2** OF **5**

FOR LINE NUMBER:
(check only one)

☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

CONSERVATIVE NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

CCI

Nature of Debt (Purpose):

Computer Printing

Mailing Address

8330 Old Courthouse Road

City State

Vienna VA

Zip Code

22180

Outstanding Balance Beginning This Period

1,538.77

Amount Incurred This Period

0

Payment This Period

0

Outstanding Balance at Close of This Period

1,538.77

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

WIB

Nature of Debt (Purpose):

Mailing Services

Mailing Address

2727 Merrilee Drive

City State

Fairfax VA

Zip Code

22031

Outstanding Balance Beginning This Period

11,227.10

Amount Incurred This Period

0

Payment This Period

0

Outstanding Balance at Close of This Period

11,227.10

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ARICO Systems

Nature of Debt (Purpose):

Computer Printing

Mailing Address

2853 Nutley Street

City State

Fairfax VA 22031

Zip Code

22031

Outstanding Balance Beginning This Period

11,651.63

Amount Incurred This Period

0

Payment This Period

0

Outstanding Balance at Close of This Period

11,651.63

1) SUBTOTALS This Period This Page (optional)..... ►

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

24,417.50

114114026

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate
schedule(s)
for each
numbered line)

PAGE **3** OF **5**

FOR LINE NUMBER:
(check only one)

☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

CONSERVATIVE NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ANDREWS REPRODUCTION CENTER

Nature of Debt (Purpose):

PRINTING

Mailing Address

10101-J BACON DRIVE

City State

BELTSVILLE

Zip Code

MD 20705

Outstanding Balance Beginning This Period

609720

Amount Incurred This Period

0

Payment This Period

0

Outstanding Balance at Close of This Period

609720

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Carter, Kent & Sullivan

Nature of Debt (Purpose):

Legal Services

Mailing Address

2020 K Street NW

City State

Washington DC

Zip Code

20006

Outstanding Balance Beginning This Period

2825988

Amount Incurred This Period

0

Payment This Period

0

Outstanding Balance at Close of This Period

2825988

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Southeast Printing

Nature of Debt (Purpose):

Printing

Mailing Address

2401 Wilson Blvd.

City State

Arlington

Zip Code

VA 22201

Outstanding Balance Beginning This Period

39906

Amount Incurred This Period

0

Payment This Period

0

Outstanding Balance at Close of This Period

39906

1) SUBTOTALS This Period This Page (optional)..... ▶

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

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... ▶

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

3475614

1141140027

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate
schedule(s)
for each
numbered line)

PAGE **4** OF **5**
FOR LINE NUMBER:
(check only one)

☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

CONSERVATIVE NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Diversified Mailing Services

Nature of Debt (Purpose):

Mailing Services

Mailing Address

4333 Davenport Road

City

State

Zip Code

Fredericksburg VA 22401

Outstanding Balance Beginning This Period

4,431.6

Amount Incurred This Period

0

Payment This Period

0

Outstanding Balance at Close of This Period

4,431.6

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Sir Speedy Printing Centers

Nature of Debt (Purpose):

Printing

Mailing Address

5881 Leesburg Pike

City

State

Zip Code

Falls Church VA 22041

Outstanding Balance Beginning This Period

8,952.2

Amount Incurred This Period

0

Payment This Period

0

Outstanding Balance at Close of This Period

8,952.2

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Saturn Corporation

Nature of Debt (Purpose):

Computer Services

Mailing Address

4701 Lydell Road

City

State

Zip Code

Cheverly MD 20781

Outstanding Balance Beginning This Period

9,788.2

Amount Incurred This Period

0

Payment This Period

0

Outstanding Balance at Close of This Period

9,788.2

1) SUBTOTALS This Period This Page (optional)..... ▶

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

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... ▶


4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

2,297.20

Hand Delivered

FROM: 1411 4000

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

<input checked="checked" type="checkbox"/> Hand Delivered	Date of Receipt 4/17/15
<input type="checkbox"/> USPS First Class Mail	Postmarked Date of Receipt
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
 PREPARER	4/17/15 DATE PREPARED

(3/2015)