

**FEC
FORM 3X**

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

RECEIVED

2012 DEC -6 AM 10:19
Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

FEC MAIL CENTER

CONSERVATIVE NATIONAL COMMITTEE

ADDRESS (number and street)

PO Box 101326

Check if different than previously reported. (ACC)

ARLINGTON

VA

22210

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00139097

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)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

- Primary (12P)
 - Convention (12C)
 - General (12G)
 - Special (12S)
 - Runoff (12R)
- Election on / / in the State of

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

- General (30G)
 - Runoff (30R)
 - Special (30S)
- Election on / / in the State of

5. Covering Period

10 / 18 / 2012

through

11 / 26 / 2013

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

12 / 06 / 2013

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

12030971038

**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:

10 ' 18 ' 2012

To:

11 ' 26 ' 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2012		543375
(b) Cash on Hand at Beginning of Reporting Period.....	20933	
(c) Total Receipts (from Line 19)	4750-	2000-
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	495933	2543375
7. Total Disbursements (from Line 31).....	400400	2447842
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	95533	95533
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	9493082	



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

12030971039

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: **70' 78' 2012** To: **11' 28' 2012**

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).....

47.50 -

20.00 -

(ii) Unitemized.....

0

0

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

47.50 -

20.00 -

(b) Political Party Committees.....

0

0

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

0

0

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

47.50 -

20.00 -

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

0

0

13. All Loans Received.....

0

0

14. Loan Repayments Received.....

0

0

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

0

0

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

0

0

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

0

0

18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3).....

0

0

(b) Levin Funds (from Schedule H5).....

0

0

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

0

0

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

47.50 -

20.00 -

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

47.50 -

20.00 -

12030971040

DETAILED SUMMARY PAGE
of Disbursements

12030971041

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		
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures	2,504 -	17,178 42
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	2,504 -	17,178 42
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1,500 -	7,300 -
24. Independent Expenditures (use Schedule E).....		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs).....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0	0
29. Other Disbursements		
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	4,004 -	24,478 42
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4,004 -	24,478 42

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)

4750 -
0
0
2504 -
0
2504 -

20000 -
0
20000 -
1717842
0
1717842

12030971042

**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	OF
<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15
<input type="checkbox"/> 12 16	<input type="checkbox"/> 17	2

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)

CONSERVATIVE NATIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. **J.S. GOLDBERG**

Mailing Address

340 SWDANCE DRIVE

City

CHESTER SPRINGS

State

PA

Zip Code

19425

FEC ID number of contributing federal political committee.

C

Name of Employer

self-employed

Occupation

Physician

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

150.-

Date of Receipt

10 / 18 / 2013

Amount of Each Receipt this Period

150.-

Full Name (Last, First, Middle Initial)

B. **CLARKE REED**

Mailing Address

139 BAYOU ROAD

City

GREENVILLE

State

MS

Zip Code

38701

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

1,000.-

Date of Receipt

11 / 01 / 2013

Amount of Each Receipt this Period

1,000.-

Full Name (Last, First, Middle Initial)

C. **JAMES RAPPAPORT**

Mailing Address

75 State St.

City

BOSTON

State

MA

Zip Code

02109

FEC ID number of contributing federal political committee.

C

Name of Employer

NEW BOSTON GROUP

Occupation

INVESTMENT

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

2,000.-

Date of Receipt

11 / 01 / 2013

Amount of Each Receipt this Period

2,000.-

SUBTOTAL of Receipts This Page (optional).....▶

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

12030971043

**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 2 OF 2

<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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

CONSERVATIVE NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Janet Guandabassi

Mailing Address
510 LIDO DRIVE

City **Ft. Lauderdale** State **FL** Zip Code **33301**

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

Name of Employer _____ Occupation **Retired**

Receipt For:
 Primary General
 Other (specify) _____

Aggregate Year-to-Date **100.-**

Date of Receipt

11 ' **02** ' **2012**

Amount of Each Receipt this Period

100.-

B. Full Name (Last, First, Middle Initial)
FORD C. O'CONNELL

Mailing Address
2400 M ST. NW. APT 214

City **WASHINGTON** State **DC** Zip Code **20037**

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

Name of Employer **CIVIC FORUM STRATEGIES** Occupation **Political Consultant**

Receipt For:
 Primary General
 Other (specify) _____

Aggregate Year-to-Date **100.-**

Date of Receipt

11 ' **02** ' **2012**

Amount of Each Receipt this Period

100.-

C. Full Name (Last, First, Middle Initial)
I. RAYMOND KIRK, III

Mailing Address
3756 WATERMAN

City **HOUSTON** State **TX** Zip Code **77005**

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

Name of Employer **self-employed** Occupation **Physician**

Receipt For:
 Primary General
 Other (specify) _____

Aggregate Year-to-Date **500.-**

Date of Receipt

11 ' **02** ' **2012**

Amount of Each Receipt this Period

500.-

SUBTOTAL of Receipts This Page (optional).....▶

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

4750.-

4750.-

12030971044

**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)

PAGE (OF 2

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CONSERVATIVE NATIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. **BB & T**

Mailing Address: **P.O. Box 819**

City: **WILSON** State: **NC** Zip Code: **27894**

Purpose of Disbursement: **Service Charge**

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement

10 / **22** / **2012**

Amount of Each Disbursement this Period

200

001
Category/
Type

Full Name (Last, First, Middle Initial)

B. **RALPH GALLIANO**

Mailing Address: **P.O. Box 101326**

City: **ARLINGTON** State: **VA** Zip Code: **22210**

Purpose of Disbursement: _____

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement

11 / **05** / **2012**

Amount of Each Disbursement this Period

500 -

001
Category/
Type

Full Name (Last, First, Middle Initial)

C. **JOHN GIZZI**

Mailing Address: **P.O. Box 101326**

City: **ARLINGTON** State: **VA** Zip Code: **22210**

Purpose of Disbursement: _____

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement

11 / **05** / **2012**

Amount of Each Disbursement this Period

2000 -

001
Category/
Type

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

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

12030971045

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CONSERVATIVE NATIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A.

BB&T

Mailing Address

P.O. Box 819

City

WILSON

State

NC

Zip Code

27894

Purpose of Disbursement

SERVICE CHARGE

Candidate Name

00.1
Category/
Type

Date of Disbursement

11 / 22 / 2012

Amount of Each Disbursement this Period

200

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Date of Disbursement

MM / DD / YYYYYY

Amount of Each Disbursement this Period

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Date of Disbursement

MM / DD / YYYYYY

Amount of Each Disbursement this Period

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

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

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

250400

12030971046

**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)		PAGE	OF
<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
CONSERVATIVE NATIONAL COMMITTEE

A. **TOMMY THOMPSON**
 Full Name (Last, First, Middle Initial)
 Mailing Address: **P.O. BOX 620650**
 City: **MIDDLETON** State: **WI** Zip Code: **53562**
 Purpose of Disbursement: **CAMPAIGN CONTRIBUTION** Category/Type: **010**
 Candidate Name: **TOMMY THOMPSON**
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)
 State: **WI** District: _____
 Date of Disbursement: **11 / 02 / 2012**
 Amount of Each Disbursement this Period: **1000-**

B. **McClintock for Congress**
 Full Name (Last, First, Middle Initial)
 Mailing Address: **P.O. BOX 276008**
 City: **SACRAMENTO** State: **CA** Zip Code: **95827**
 Purpose of Disbursement: **CAMPAIGN CONTRIBUTION** Category/Type: **010**
 Candidate Name: **TOM MCCLINTOCK**
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)
 State: **CA** District: _____
 Date of Disbursement: **11 / 02 / 2012**
 Amount of Each Disbursement this Period: **500-**

C. _____
 Full Name (Last, First, Middle Initial)
 Mailing Address: _____
 City: _____ State: _____ Zip Code: _____
 Purpose of Disbursement: _____ Category/Type: _____
 Candidate Name: _____
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)
 State: _____ District: _____
 Date of Disbursement: _____
 Amount of Each Disbursement this Period: _____

SUBTOTAL of Disbursements This Page (optional).....▶ **1500-**
TOTAL This Period (last page this is the number only).....▶ **1500-**

12030971047

SCHEDULE D (FEC Form 3X)
DEBTS AND OBLIGATIONS
 Excluding Loans

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

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

19,269.39

Amount Incurred This Period

0

Payment This Period

0

Outstanding Balance at Close of This Period

19,269.39

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

17,974.00

Amount Incurred This Period

0

Payment This Period

0

Outstanding Balance at Close of This Period

17,974.00

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

3,915.60

Amount Incurred This Period

0

Payment This Period

0

Outstanding Balance at Close of This Period

3,915.60

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) ▶

21,458.35

12030971048

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 Zip Code

Vienna VA

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 Zip Code

Fairfax VA

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 Zip Code

Fairfax VA 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

12030971049

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
 40

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

12030971050

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
40

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 <div style="border: 1px solid black; padding: 2px; display: inline-block;">44316</div>	Amount Incurred This Period <div style="border: 1px solid black; padding: 2px; display: inline-block;">0</div>	Payment This Period <div style="border: 1px solid black; padding: 2px; display: inline-block;">0</div>	Outstanding Balance at Close of This Period <div style="border: 1px solid black; padding: 2px; display: inline-block;">44316</div>
---	---	---	---

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 <div style="border: 1px solid black; padding: 2px; display: inline-block;">89522</div>	Amount Incurred This Period <div style="border: 1px solid black; padding: 2px; display: inline-block;">0</div>	Payment This Period <div style="border: 1px solid black; padding: 2px; display: inline-block;">0</div>	Outstanding Balance at Close of This Period <div style="border: 1px solid black; padding: 2px; display: inline-block;">89522</div>
---	---	---	---

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 <div style="border: 1px solid black; padding: 2px; display: inline-block;">97882</div>	Amount Incurred This Period <div style="border: 1px solid black; padding: 2px; display: inline-block;">0</div>	Payment This Period <div style="border: 1px solid black; padding: 2px; display: inline-block;">0</div>	Outstanding Balance at Close of This Period <div style="border: 1px solid black; padding: 2px; display: inline-block;">97882</div>
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1) SUBTOTALS This Period This Page (optional)..... ▶	<div style="border: 1px solid black; padding: 10px; display: inline-block;">229720</div>
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) ▶	

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SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

PAGE **5** 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

James K. Jeanblanc

Nature of Debt (Purpose):

Legal Services

Mailing Address

1730 M St. NW

City State

Washington DC

Zip Code

20036

Outstanding Balance Beginning This Period

12,001.63

Amount Incurred This Period

0

Payment This Period

0

Outstanding Balance at Close of This Period

12,001.63

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

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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) ▶

12,001.63
9,493.082

12030971052

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.

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<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"/>	
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Amj *12/6/12*
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