

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
HOUSE CONSERVATIVES FUND

ADDRESS (number and street) P.O. Box 2752
 Check if different than previously reported. (ACC)
Washington DC 20013

2. **FEC IDENTIFICATION NUMBER** C00326439
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 Quarterly 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 (12G)
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 12 01 2009 through 12 31 2009

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 Lisa Lisker

Signature of Treasurer Electronically Filed by Lisa Lisker Date 01 29 2010

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									
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FEC FORM 3X
(Rev. 12/2004)

A. Form/Schedule : **F3XN**

Transaction ID :

This month HCF has received additional information from several contributors, which was requested in order to meet best efforts compliance efforts. The information is reported in memo entries on Schedule A. All HCF solicitation materials include a clear and conspicuous request for contributor information, including contributor requirements under federal law. In the event that a contributor does not provide that information with the original contribution, HCF sends a written request asking for same. For those contributors in this month whom have not provided the necessary information, a best efforts letter has been sent.

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
HOUSE CONSERVATIVES FUND

Report Covering the Period: From:

M	M
1	2

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		45838.26
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	40003.57									
(c) Total Receipts (from Line 19)	87633.72	684074.42								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	127637.29	729912.68								
7. Total Disbursements (from Line 31)	73345.81	675621.20								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	54291.48	54291.48								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
HOUSE CONSERVATIVES FUND

Report Covering the Period: From:

M	M
1	2

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

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)	24255.00	174595.00
(ii) Unitemized	27876.72	305411.14
(iii) TOTAL (add Lines 11(a)(i) and (ii)	52131.72	480006.14
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	35500.00	202136.72
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	87631.72	682142.86
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	2.00	1931.56
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 Transfer (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))	87633.72	684074.42
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	87633.72	684074.42

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	69899.81	648177.30
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	69899.81	648177.30
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	16712.90
24. Independent Expenditure (use Schedule E)	0.00	6000.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(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	3446.00	4731.00
(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))	3446.00	4731.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	73345.81	675621.20
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	73345.81	675621.20

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	87631.72	682142.86
34. Total Contribution Refunds (from Line 28(d))	3446.00	4731.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	84185.72	677411.86
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	69899.81	648177.30
37. Offsets to Operating Expenditures (from Line 15, page 3)	2.00	1931.56
38. Net Operating Expenditures (subtract Line 37 from Line 36)	69897.81	646245.74

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 69

(check only one)

<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)
HOUSE CONSERVATIVES FUND

A.

Full Name (Last, First, Middle Initial)
Mrs Patricia Aikin

Mailing Address 234 Woodbine By The Lake Unit 4

City State Zip Code
Colchester VT 05446-6345

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

Name of Employer information requested Occupation information requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 201.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 7 / 2 0 0 9

Transaction ID: SA11AI.25053

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)
Mr Kenneth F X Albers

Mailing Address PO Box 727

City State Zip Code
Spring Lake NJ 07762-0727

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

Name of Employer information requested Occupation information requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.25012

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
Mr James R Alley

Mailing Address 12713 SE Ranson Rd

City State Zip Code
Lees Summit MO 64082-8900

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

Name of Employer retired Occupation retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 212.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 9 / 2 0 0 9

Transaction ID: SA11AI.25324

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL 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: PAGE 8 / 69
(check only one)

<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)
HOUSE CONSERVATIVES FUND

A.

Full Name (Last, First, Middle Initial) Dr Stephen Amann		Date of Receipt MM / DD / YYYY 12 / 07 / 2009
Mailing Address 3002 Orchid Cir		Transaction ID: SA11AI.25214
City Tupelo	State MS	Zip Code 38801-8210
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer heath specialist PA	Occupation physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.

Full Name (Last, First, Middle Initial) Dr Mark Amster		Date of Receipt MM / DD / YYYY 12 / 14 / 2009
Mailing Address 525 Long Pond Dr		Transaction ID: SA11AI.25480
City Harwich	State MA	Zip Code 02645-1227
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer information requested	Occupation information requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.

Full Name (Last, First, Middle Initial) Mr James K Anderson		Date of Receipt MM / DD / YYYY 11 / 18 / 2009
Mailing Address 903 Chautauqua Ave		Transaction ID: SA11AI.26491
City Norman	State OK	Zip Code 73069-4610
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer information requested	Occupation information requested	This month HCF has received additional information from several contributors, which was requested in [MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional)	500.00
TOTAL 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: PAGE 9 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

A. Full Name (Last, First, Middle Initial)
Dr. Wallace Arthur

Mailing Address 155 S Madison St Ste 237

City State Zip Code
Denver CO 80209-3013

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

Name of Employer Self - Prt. Practice Occupation MD Psychiatry

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.26095

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Dr Edward Aston

Mailing Address 31291 Paseo Crucero

City State Zip Code
San Juan Capo CA 92675-5399

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

Name of Employer Self Employed Occupation Sef Employed

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 9

Transaction ID: SA11AI.25549

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Dr Charles Barrett, MD

Mailing Address 17351 Tall Tree Trl

City State Zip Code
Chagrin Falls OH 44023-1423

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

Name of Employer information requested Occupation information requested

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 7 / 2 0 0 9

Transaction ID: SA11AI.25238

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **1300.00**

TOTAL 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: PAGE 10 / 69

(check only one)

<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)
HOUSE CONSERVATIVES FUND

A.

Full Name (Last, First, Middle Initial)
Ms Helen C Belcher

Mailing Address 157 South St

City State Zip Code
Plymouth MA 02360-7605

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

Name of Employer information requested Occupation information requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 9

Transaction ID: SA11AI.26492

Amount of Each Receipt this Period

25.00

This month HCF has received additional information from several contributors, which was requested in **[MEMO ITEM]**

B.

Full Name (Last, First, Middle Initial)
Ms Helen C Belcher

Mailing Address 157 South St

City State Zip Code
Plymouth MA 02360-7605

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

Name of Employer information requested Occupation information requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 9

Transaction ID: SA11AI.25380

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Jean V Belding

Mailing Address 151 W Glenrose Dr

City State Zip Code
Pueblo CO 81007-3683

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

Name of Employer information requested Occupation information requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 205.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.25867

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional) ▶

80.00

TOTAL 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: PAGE 11 / 69
(check only one)

<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
							17

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NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

A. Full Name (Last, First, Middle Initial)
Mr Sheridan Biggs

Mailing Address P O Box 160

City State Zip Code
Quaker Street NY 12141-0160

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

Name of Employer information requested Occupation information requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **11 / 18 / 2009**

Transaction ID: SA11AI.26493

Amount of Each Receipt this Period **100.00**

This month HCF has received additional information from several contributors, which was requested in **[MEMO ITEM]**

B. Full Name (Last, First, Middle Initial)
Dr. Charles Bill

Mailing Address 1575 Ramblewood Dr Ste 200

City State Zip Code
East Lansing MI 48823-6384

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

Name of Employer information requested Occupation information requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **12 / 24 / 2009**

Transaction ID: SA11AI.25926

Amount of Each Receipt this Period **1000.00**

C. Full Name (Last, First, Middle Initial)
Mrs Mary E Bisette

Mailing Address 2542 Virginia Rd

City State Zip Code
Edenton NC 27932-8015

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

Name of Employer retired Occupation retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **255.00**

Date of Receipt **12 / 14 / 2009**

Transaction ID: SA11AI.25441

Amount of Each Receipt this Period **50.00**

SUBTOTAL of Receipts This Page (optional) ► **1050.00**

TOTAL 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: PAGE 12 / 69
(check only one)

<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)
HOUSE CONSERVATIVES FUND

A. Full Name (Last, First, Middle Initial)
Dr Robert Blereau

Mailing Address 3020 Lake Palourde Dr

City State Zip Code
Morgan City LA 70380-1562

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

Name of Employer self Occupation
self physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 29 / 2009

Transaction ID: SA11AI.26053

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Mrs Susan Brunoff

Mailing Address 334 W Cedar St

City State Zip Code
New Holland PA 17557-1202

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

Name of Employer retired Occupation
retired retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **285.00**

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 14 / 2009

Transaction ID: SA11AI.25344

Amount of Each Receipt this Period
105.00

C. Full Name (Last, First, Middle Initial)
Mrs Susan Brunoff

Mailing Address 334 W Cedar St

City State Zip Code
New Holland PA 17557-1202

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

Name of Employer retired Occupation
retired retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 14 / 2009

Transaction ID: SA11AI.25345

Amount of Each Receipt this Period
105.00

SUBTOTAL of Receipts This Page (optional) ► **260.00**

TOTAL 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: PAGE 13 / 69
(check only one)

<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)
HOUSE CONSERVATIVES FUND

A. Full Name (Last, First, Middle Initial)
Ms Elizabeth Bryden

Mailing Address 1 W 67th St Apt #611

City State Zip Code
New York NY 10023-6200

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

Name of Employer retired Occupation retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.26298

Amount of Each Receipt this Period
105.00

B. Full Name (Last, First, Middle Initial)
Barton Bulman

Mailing Address 11500 Goldenrod Rd

City State Zip Code
Caledonia MN 55921-2801

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

Name of Employer retired Occupation retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 2 / 2 0 0 9

Transaction ID: SA11AI.25669

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr Robert E Burgess

Mailing Address 1700 Orrtanna Rd

City State Zip Code
Orrtanna PA 17353-9738

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

Name of Employer information requested Occupation information requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 9

Transaction ID: SA11AI.25462

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **255.00**

TOTAL 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: PAGE 14 / 69

(check only one)

<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)
HOUSE CONSERVATIVES FUND

A.

Full Name (Last, First, Middle Initial)
Mr Robert E Burgess

Mailing Address 1700 Orrtanna Rd

City State Zip Code
Orrtanna PA 17353-9738

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

Name of Employer information requested Occupation information requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 2 / 2 0 0 9

Transaction ID: SA11AI.25750

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)
Mrs John A Campbell

Mailing Address 900 Seminole Rd

City State Zip Code
Radcliff KY 40160-2241

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

Name of Employer self Occupation homemaker

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 340.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 9 / 2 0 0 9

Transaction ID: SA11AI.26027

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)
Dr Steven Card

Mailing Address 11001 Honeycutt Rd

City State Zip Code
Raleigh NC 27614-9678

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

Name of Employer information requested Occupation information requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 9

Transaction ID: SA11AI.25517

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

595.00

TOTAL 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 15 / 69
	<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)
HOUSE CONSERVATIVES FUND

A.	Full Name (Last, First, Middle Initial) Dr Jeffrey Carr		Date of Receipt
	Mailing Address 5801 Quail Creek Dr		<input type="text" value="12"/> / <input type="text" value="14"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Tyler	TX	75703-4530
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer information requested		Occupation information requested	Transaction ID: SA11AI.25533
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="250.00"/>	<input type="text" value="250.00"/>

B.	Full Name (Last, First, Middle Initial) Mr John Carter		Date of Receipt
	Mailing Address 10 Alexandra Dr		<input type="text" value="11"/> / <input type="text" value="09"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Stamford	CT	06903-1730
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer information requested		Occupation information requested	Transaction ID: SA11AI.26494
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="230.00"/>	<input type="text" value="30.00"/>

This month HCF has received additional information from several contributors, which was requested in **[MEMO ITEM]**

C.	Full Name (Last, First, Middle Initial) Mr Alberto Casaretto		Date of Receipt
	Mailing Address 1600 SE 8th St		<input type="text" value="12"/> / <input type="text" value="14"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Fort Lauderdale	FL	33316-1408
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer self		Occupation Nephrologist Physician	Transaction ID: SA11AI.25559
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="500.00"/>	<input type="text" value="500.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="750.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 69

(check only one)

<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)
HOUSE CONSERVATIVES FUND

A.

Full Name (Last, First, Middle Initial)
Dr. Sooho Choi

Mailing Address 2514 N Falconer Way

City State Zip Code
Orange CA 92867-6493

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

Name of Employer information requested Occupation information requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 2 / 2 0 0 9

Transaction ID: SA11AI.25712

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)
Charis Cole

Mailing Address P O Box 491

City State Zip Code
Bryn Athyn PA 19009-0491

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

Name of Employer retired Occupation retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 9

Transaction ID: SA11AI.25386

Amount of Each Receipt this Period

520.00

C.

Full Name (Last, First, Middle Initial)
Dr. Curt Conry

Mailing Address 1630 Norman Dr

City State Zip Code
Sewickley PA 15143-8557

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

Name of Employer Armstrong County Memorial Hospital Occupation physician

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.25924

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1770.00

TOTAL 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 17 / 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

A. Full Name (Last, First, Middle Initial)
Dr Elizabeth Cosmai Cintron

Mailing Address 15489 Laguna Hills Dr

City State Zip Code
Fort Myers FL 33908-9644

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

Name of Employer information requested Occupation information requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **12 / 07 / 2009**

Transaction ID: SA11AI.25192

Amount of Each Receipt this Period **250.00**

B. Full Name (Last, First, Middle Initial)
Mr Thomas Courtney

Mailing Address 906 Pebblebrook Dr

City State Zip Code
Allen TX 75002-2216

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

Name of Employer retired Occupation retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **280.00**

Date of Receipt **12 / 24 / 2009**

Transaction ID: SA11AI.25909

Amount of Each Receipt this Period **50.00**

C. Full Name (Last, First, Middle Initial)
Mr Robert Crawford

Mailing Address 1253 Sutherland Ct # T

City State Zip Code
Dunedin FL 34698-8355

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

Name of Employer information requested Occupation information requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **11 / 16 / 2009**

Transaction ID: SA11AI.26495

Amount of Each Receipt this Period **100.00**

This month HCF has received additional information from several contributors, which was requested in **[MEMO ITEM]**

SUBTOTAL of Receipts This Page (optional) **300.00**

TOTAL 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: PAGE 18 / 69
(check only one)

<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)
HOUSE CONSERVATIVES FUND

A. Full Name (Last, First, Middle Initial)
Dr Devin Cunning

Mailing Address 1760 McCulloch Blvd N #100

City State Zip Code
Lake Havasu City AZ 86403-6559

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

Name of Employer Occupation
Arizona Coast Ear, Nose & Throat Physician

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **250.00**

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 9

Transaction ID: SA11AI.25511

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Dr Royden Daniels

Mailing Address 3618 Sope Creek Farm SE

City State Zip Code
Marietta GA 30067-5174

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

Name of Employer Occupation
Northwest Radiology Consultants Physician

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **250.00**

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 8 / 2 0 0 9

Transaction ID: SA11AI.25966

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Dr John Darling

Mailing Address 200 W Iler Spring Dr Ste 285

City State Zip Code
Milwaukee WI 53217-5058

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

Name of Employer Occupation
information requested information requested

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **250.00**

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 7 / 2 0 0 9

Transaction ID: SA11AI.25234

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) **750.00**

TOTAL 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: PAGE 19 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

A. Full Name (Last, First, Middle Initial)
Mr Paul Decleva
Mailing Address 350 N St Paul Ste 1625
City State Zip Code
Dallas TX 75201-4259
FEC ID number of contributing federal political committee. **C**
Name of Employer self employed Occupation consultant
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00
Date of Receipt: 12 / 14 / 2009
Transaction ID: SA11AI.25341
Amount of Each Receipt this Period: 150.00

B. Full Name (Last, First, Middle Initial)
Mr J Fred Doornbos
Mailing Address 1208 Wylde Green Rd
City State Zip Code
Iowa City IA 52246
FEC ID number of contributing federal political committee. **C**
Name of Employer information requested Occupation information requested
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 235.00
Date of Receipt: 10 / 27 / 2009
Transaction ID: SA11AI.26496
Amount of Each Receipt this Period: 35.00
This month HCF has received additional information from several contributors, which was requested in **[MEMO ITEM]**

C. Full Name (Last, First, Middle Initial)
Mrs Norma Dorfner
Mailing Address 1581 Oakview Dr
City State Zip Code
Columbus OH 43235-1138
FEC ID number of contributing federal political committee. **C**
Name of Employer information requested Occupation information requested
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00
Date of Receipt: 12 / 07 / 2009
Transaction ID: SA11AI.25156
Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ► 250.00
TOTAL 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: PAGE 20 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

A. Full Name (Last, First, Middle Initial)
Mr James B Downey
Mailing Address 26000 Newbridge Dr
City Los Altos Hills State CA Zip Code 94022-2631
FEC ID number of contributing federal political committee. **C**
Name of Employer Altos Sonoma Corp. Occupation executive
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 11 / 09 / 2009
Transaction ID: SA11AI.26497
Amount of Each Receipt this Period 100.00
This month HCF has received additional information from several contributors, which was requested in **[MEMO ITEM]**

B. Full Name (Last, First, Middle Initial)
Mr James B Downey
Mailing Address 26000 Newbridge Dr
City Los Altos Hills State CA Zip Code 94022-2631
FEC ID number of contributing federal political committee. **C**
Name of Employer Altos Sonoma Corp. Occupation executive
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt 12 / 22 / 2009
Transaction ID: SA11AI.25668
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Dr Robert Duffin
Mailing Address 33 E Lone Hollow Dr
City Sandy State UT Zip Code 84092-5500
FEC ID number of contributing federal political committee. **C**
Name of Employer information requested Occupation information requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 12 / 14 / 2009
Transaction ID: SA11AI.25527
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 350.00
TOTAL 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: PAGE 21 / 69
(check only one)

<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)
HOUSE CONSERVATIVES FUND

A. Full Name (Last, First, Middle Initial)
Dr Walter Edwards

Mailing Address 993 C Johnso Ferry Rd NE #100

City Atlanta State GA Zip Code 30342-1653

FEC ID number of contributing federal political committee. C

Name of Employer Northside Orthopedic Clinic Occupation Physician Orthopedick Surgery

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt M M / D D / Y Y Y Y
1 2 / 0 7 / 2 0 0 9

Transaction ID: SA11AI.25204

Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Robert Ellis

Mailing Address 203 Newlin Pointe

City Glen Mills State PA Zip Code 19342-2388

FEC ID number of contributing federal political committee. C

Name of Employer information requested Occupation information requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.25921

Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Mr Roland Ellis

Mailing Address 320 Wisteria Ave

City Reading State PA Zip Code 19606

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt M M / D D / Y Y Y Y
1 2 / 0 7 / 2 0 0 9

Transaction ID: SA11AI.25126

Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional) 375.00

TOTAL 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 22 / 69
	<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)
HOUSE CONSERVATIVES FUND

A.	Full Name (Last, First, Middle Initial) Mr Ronald Ellis	Date of Receipt MM / DD / YYYY 12 / 29 / 2009
	Mailing Address 2340 E 17th St	Transaction ID: SA11AI.26024
	City State Zip Code Brooklyn NY 11229-4436	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer retired Occupation retired	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00

B.	Full Name (Last, First, Middle Initial) Mr William J Enrich	Date of Receipt MM / DD / YYYY 12 / 28 / 2009
	Mailing Address 301 E 75th St Apt 5F	Transaction ID: SA11AI.25952
	City State Zip Code New York NY 10021-3015	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00

C.	Full Name (Last, First, Middle Initial) Mr Paul Fadow	Date of Receipt MM / DD / YYYY 12 / 14 / 2009
	Mailing Address 1310 Regatta Dr	Transaction ID: SA11AI.25399
	City State Zip Code Wilmington NC 28405	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer RETIRED Occupation RETIRED	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00

SUBTOTAL of Receipts This Page (optional)	275.00
TOTAL 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 23 / 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

A.	Full Name (Last, First, Middle Initial) Ms. Jane Fallon	Date of Receipt MM / DD / YYYY 11 / 23 / 2009
	Mailing Address 4775 Ormonde Dr	Transaction ID: SA11AI.26498
	City State Zip Code Cazenovia NY 13035-9348	Amount of Each Receipt this Period 175.00
	FEC ID number of contributing federal political committee. C	This month HCF has received additional information from several contributors, which was requested in [MEMO ITEM]
	Name of Employer information requested Occupation information requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

B.	Full Name (Last, First, Middle Initial) Dr Bohuslav Finta	Date of Receipt MM / DD / YYYY 12 / 09 / 2009
	Mailing Address 2442 Black Horse Dr NE	Transaction ID: SA11AI.25319
	City State Zip Code Grand Rapids MI 49505-3968	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer information requested Occupation information requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Dr. Irving Fishman	Date of Receipt MM / DD / YYYY 12 / 24 / 2009
	Mailing Address 11706 Woodknoll Ln	Transaction ID: SA11AI.25930
	City State Zip Code Houston TX 77071-2328	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer self employed Occupation urologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	500.00
TOTAL 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: PAGE 24 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

A. Full Name (Last, First, Middle Initial)
Mrs Jane Fuhrmann
 Mailing Address 3115 Fellowship Rd
 City Basking Ridge State NJ Zip Code 07920-3904
 Date of Receipt 12 / 14 / 2009
Transaction ID: SA11AI.25381
 Amount of Each Receipt this Period 100.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer information requested Occupation information requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

B. Full Name (Last, First, Middle Initial)
Dr Thomas Gibson
 Mailing Address 527 Winn Rd
 City Scottsboro State AL Zip Code 35769-6540
 Date of Receipt 12 / 07 / 2009
Transaction ID: SA11AI.25230
 Amount of Each Receipt this Period 250.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer information requested Occupation information requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

C. Full Name (Last, First, Middle Initial)
Dr Bobby Graham
 Mailing Address 2306 Twin Lakes Cir
 City Jackson State MS Zip Code 39211-6757
 Date of Receipt 12 / 07 / 2009
Transaction ID: SA11AI.25244
 Amount of Each Receipt this Period 250.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Jackson Oncology Associates Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

SUBTOTAL of Receipts This Page (optional) ► 600.00
TOTAL 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 25 / 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

A.	Full Name (Last, First, Middle Initial) Mr Russell Gregory		Date of Receipt
	Mailing Address 141 Harding Rd		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	West View	PA	15229-1112
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer information requested		Occupation information requested	Transaction ID: SA11AI.26499
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 225.00	
		Amount of Each Receipt this Period	<input type="text"/> 75.00
This month HCF has received additional information from several contributors, which was requested in [MEMO ITEM]			

B.	Full Name (Last, First, Middle Initial) Mr Paul Haglin		Date of Receipt
	Mailing Address 300 Eagles Nest Farm Rd		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Hawk Point	MO	63349-2000
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer information requested		Occupation information requested	Transaction ID: SA11AI.26281
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 300.00	
		Amount of Each Receipt this Period	<input type="text"/> 100.00

C.	Full Name (Last, First, Middle Initial) Ms Margaret L Hanson		Date of Receipt
	Mailing Address 240 Walnut St		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Bristol	PA	19007-4929
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer retired		Occupation retired	Transaction ID: SA11AI.25643
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 430.00	
		Amount of Each Receipt this Period	<input type="text"/> 40.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 140.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 26 / 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

A. Full Name (Last, First, Middle Initial)
Ms Catherine Heatley

Mailing Address 1036 Greenville Mercer Rd

City Mercer State PA Zip Code 16137

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

Name of Employer information requested Occupation information requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: MM / DD / YYYY
11 / 09 / 2009

Transaction ID: SA11AI.26500

Amount of Each Receipt this Period: 50.00

This month HCF has received additional information from several contributors, which was requested in **[MEMO ITEM]**

B. Full Name (Last, First, Middle Initial)
Ms Catherine Heatley

Mailing Address 1036 Greenville Mercer Rd

City Mercer State PA Zip Code 16137

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

Name of Employer information requested Occupation information requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt: MM / DD / YYYY
12 / 07 / 2009

Transaction ID: SA11AI.25074

Amount of Each Receipt this Period: 50.00

C. Full Name (Last, First, Middle Initial)
Mr. Sean Hehn

Mailing Address 4099 Hemlock Dr

City Medford State OR Zip Code 97504-9678

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

Name of Employer information requested Occupation information requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: MM / DD / YYYY
12 / 31 / 2009

Transaction ID: SA11AI.26119

Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ **550.00**

TOTAL 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: PAGE 27 / 69
(check only one)

<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)
HOUSE CONSERVATIVES FUND

A. Full Name (Last, First, Middle Initial)
Mrs Doris Hendricks

Mailing Address 8810 Walther Blvd Apt 2229

City State Zip Code
Parkville MD 21234-5759

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

Name of Employer Occupation
retired retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 430.00

Date of Receipt
MM / DD / YYYY
12 / 07 / 2009

Transaction ID: SA11AI.25039

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Mr Reynard H Hoffmann

Mailing Address 5146 Belden Ave Apt C2

City State Zip Code
Downers Grove IL 60515-4766

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

Name of Employer Occupation
information requested information requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
11 / 18 / 2009

Transaction ID: SA11AI.26501

Amount of Each Receipt this Period
200.00

This month HCF has received additional information from several contributors, which was requested in **[MEMO ITEM]**

C. Full Name (Last, First, Middle Initial)
Dr. Richard Jackson

Mailing Address 3817 Southwestern Blvd

City State Zip Code
Dallas TX 75225-7121

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

Name of Employer Occupation
Dallas Neurosury Ass. Surgeon

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: SA11AI.26099

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **275.00**

TOTAL 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: PAGE 28 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

A. Full Name (Last, First, Middle Initial)
Mrs Gay Jagels

Mailing Address PO Box 3462

City State Zip Code
Arnold CA 95223

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
retired retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt M M / D D / Y Y Y Y
1 2 / 2 2 / 2 0 0 9

Transaction ID: SA11AI.25831

Amount of Each Receipt this Period 35.00

B. Full Name (Last, First, Middle Initial)
Dr Mark Janas

Mailing Address 3793 Brighton Manor Ln

City State Zip Code
Cincinnati OH 45208-1965

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
information requested information requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt M M / D D / Y Y Y Y
1 2 / 1 4 / 2 0 0 9

Transaction ID: SA11AI.25551

Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
Mr Roy T Johnson

Mailing Address 114 Sandhurt Dr

City State Zip Code
Pittsburgh PA 15241-2444

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
information requested information requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt M M / D D / Y Y Y Y
1 2 / 1 4 / 2 0 0 9

Transaction ID: SA11AI.25434

Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) 585.00

TOTAL 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: PAGE 29 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

A. Full Name (Last, First, Middle Initial)
Dr. William Jones, M.D.
Mailing Address 9810 Noriega Dr

City State Zip Code
Pensacola FL 32514-8100

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

Name of Employer Self Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.26103

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Dr Michael Kerley
Mailing Address 2405 Cobb Ranch Rd

City State Zip Code
Paris TX 75462-8043

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

Name of Employer information requested Occupation information requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 7 / 2 0 0 9

Transaction ID: SA11AI.25236

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Mr Leonard Kirk
Mailing Address 6 Hunter Dr

City State Zip Code
Bel Air MD 21014-3934

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

Name of Employer retired Occupation retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 9

Transaction ID: SA11AI.25422

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional) ► 1650.00

TOTAL 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: PAGE 30 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

A. Full Name (Last, First, Middle Initial)
Mr John Kleylein
 Mailing Address 1909 Trout Fm Rd
 City Jarrettsville State MD Zip Code 21084-2024
 Date of Receipt 12 / 09 / 2009
Transaction ID: SA11AI.25333
 Amount of Each Receipt this Period 50.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 402.00

B. Full Name (Last, First, Middle Initial)
William Koetzle
 Mailing Address 611 Pennsylvania Avenue
 City Washington State DC Zip Code 20003
 Date of Receipt 12 / 03 / 2009
Transaction ID: SA11AI.26410
 Amount of Each Receipt this Period 250.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Chevron Corporation Occupation Mgr., Policy, Government & Public Affa
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

C. Full Name (Last, First, Middle Initial)
Mr Joe Kwiatkowski
 Mailing Address 3330 Halseyville Rd
 City Trumansburg State NY Zip Code 14886-9138
 Date of Receipt 11 / 16 / 2009
Transaction ID: SA11AI.26502
 Amount of Each Receipt this Period 50.00
 FEC ID number of contributing federal political committee. C
 Name of Employer information requested Occupation information requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00
 This month HCF has received additional information from several contributors, which was requested in [MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶ 300.00
TOTAL 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: PAGE 31 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

A. Full Name (Last, First, Middle Initial)
Dr Joseph Lamancusa

Mailing Address 207 W Wallace St #A

City Findlay State OH Zip Code 45840-1212

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

Name of Employer information requested Occupation information requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 07 / 2009

Transaction ID: SA11AI.25196

Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Mr James E Lange

Mailing Address 5170 W Indian Camp Rd

City Prescott State AZ Zip Code 86305-1544

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 335.00

Date of Receipt 12 / 31 / 2009

Transaction ID: SA11AI.26287

Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
Mr Frank R Laurie, Jr

Mailing Address 431 Lowell Dr

City South Elgin State IL Zip Code 60177

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

Name of Employer information requested Occupation information requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt 11 / 18 / 2009

Transaction ID: SA11AI.26490

Amount of Each Receipt this Period 25.00

best efforts compliance; employer & occupation info received since original disclosure
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► 300.00

TOTAL 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: PAGE 32 / 69
(check only one)

<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)
HOUSE CONSERVATIVES FUND

A. Full Name (Last, First, Middle Initial)
Mr Frank R Laurie, Jr

Mailing Address 431 Lowell Dr

City State Zip Code
South Elgin IL 60177

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

Name of Employer information requested Occupation information requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 9

Transaction ID: SA11AI.25403

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Mr Ralph K Lewis

Mailing Address 13559 Kensington Pl

City State Zip Code
Carmel IN 46032-5360

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

Name of Employer retired Occupation retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 7 / 2 0 0 9

Transaction ID: SA11AI.25099

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Mr John A Lupoli

Mailing Address 10128 Maroon St

City State Zip Code
El Monte CA 91733-2062

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

Name of Employer retired Occupation retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 7 / 2 0 0 9

Transaction ID: SA11AI.25130

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **100.00**

TOTAL 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: PAGE 33 / 69

(check only one)

<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)
HOUSE CONSERVATIVES FUND

A.

Full Name (Last, First, Middle Initial)
Dr Dennis Maiman

Mailing Address 1155 N Mayfair Rd

City State Zip Code
Milwaukee WI 53226-3421

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

Name of Employer information requested Occupation information requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 8 / 2 0 0 9

Transaction ID: SA11AI.25964

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)
Dr Mark Mainwaring

Mailing Address 2045 Irby Ln

City State Zip Code
Murfreeboro TN 37127-6695

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

Name of Employer TN ONC grp Occupation Medical Oncologist

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 9

Transaction ID: SA11AI.25523

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
Mr Ronald James Malleis

Mailing Address 2605 N Bend Rd Apt 1608

City State Zip Code
Ashtabula OH 44004

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

Name of Employer Dept. of Veterans Affairs Occupation Physician

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 286.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 2 / 2 0 0 9

Transaction ID: SA11AI.25765

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

510.00

TOTAL 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: PAGE 34 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

A. Full Name (Last, First, Middle Initial)
Mrs Helen Marshall

Mailing Address 827 Susan Ave

City State Zip Code
Woodstock VA 22664-1133

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

Name of Employer Occupation
retired retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 875.00

Date of Receipt
MM / DD / YYYY
12 / 14 / 2009

Transaction ID: SA11AI.25398

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Dr. Tapan Mehta

Mailing Address 3195 Woodhaven Dr

City State Zip Code
Bourbonnais IL 60914-4902

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

Name of Employer Occupation
Kaukakee Valley Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
12 / 22 / 2009

Transaction ID: SA11AI.25710

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr James Meslin

Mailing Address 2 Anson Brown Rd

City State Zip Code
Johnston RI 02919

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

Name of Employer Occupation
retired retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
MM / DD / YYYY
12 / 14 / 2009

Transaction ID: SA11AI.25396

Amount of Each Receipt this Period
125.00

SUBTOTAL of Receipts This Page (optional) ► **675.00**

TOTAL 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 35 / 69
	<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)
HOUSE CONSERVATIVES FUND

A. Full Name (Last, First, Middle Initial)
Dr Thomas Morse

Mailing Address 4985 Smoketalk Ln

City State Zip Code
Westerville OH 43081-4432

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

Name of Employer information requested Occupation information requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **12 / 07 / 2009**

Transaction ID: SA11AI.25222

Amount of Each Receipt this Period **250.00**

B. Full Name (Last, First, Middle Initial)
Mr G Robert Murdoch

Mailing Address 1957 Laurelhurst Dr

City State Zip Code
Salt Lake City UT 84108-3355

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

Name of Employer information requested Occupation information requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **11 / 16 / 2009**

Transaction ID: SA11AI.26503

Amount of Each Receipt this Period **50.00**

This month HCF has received additional information from several contributors, which was requested in **[MEMO ITEM]**

C. Full Name (Last, First, Middle Initial)
Mr. Terrance H. Murphree

Mailing Address 14925 Memorial Dr Ste 250

City State Zip Code
Houston TX 77079-5136

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

Name of Employer information requested Occupation information requested
United Steel Structures Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt **12 / 22 / 2009**

Transaction ID: SA11AI.25740

Amount of Each Receipt this Period **100.00**

SUBTOTAL of Receipts This Page (optional) **350.00**

TOTAL 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: PAGE 36 / 69
(check only one)

<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)
HOUSE CONSERVATIVES FUND

A. Full Name (Last, First, Middle Initial)
Dr. Jeffrey Parks

Mailing Address 400 Lakebridge Plaza Dr

City State Zip Code
Ormond Beach FL 32174-5157

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

Name of Employer information requested Occupation information requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.26083

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr Robert Paschke

Mailing Address 2905 Dorman Ave

City State Zip Code
Minneapolis MN 55406-1837

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

Name of Employer information requested Occupation information requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.26504

Amount of Each Receipt this Period
100.00

This month HCF has received additional information from several contributors, which was requested in **[MEMO ITEM]**

C. Full Name (Last, First, Middle Initial)
Mr Robert Paschke

Mailing Address 2905 Dorman Ave

City State Zip Code
Minneapolis MN 55406-1837

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

Name of Employer information requested Occupation information requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 9 / 2 0 0 9

Transaction ID: SA11AI.25325

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **600.00**

TOTAL 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: PAGE 37 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

A. Full Name (Last, First, Middle Initial)
Mr Agris Pavlovskis

Mailing Address 829 Ann St

City East Lansing State MI Zip Code 48823-4509

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

Name of Employer Michigan Exchange Carrier Assn Occupation Economist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 07 / 2009

Transaction ID: SA11AI.25149

Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
Mr Nicholas I Peters

Mailing Address PO Box 32

City Beltsville State MD Zip Code 20704-0032

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

Name of Employer retired Occupation retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 655.00

Date of Receipt 12 / 07 / 2009

Transaction ID: SA11AI.25148

Amount of Each Receipt this Period 160.00

C. Full Name (Last, First, Middle Initial)
Dr Charles Phelps, II

Mailing Address 4303 Sierra Dr

City Denison State TX Zip Code 75020-0605

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

Name of Employer Radiologist Occupation Radiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 07 / 2009

Transaction ID: SA11AI.25258

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 460.00

TOTAL 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: PAGE 38 / 69
(check only one)

<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)
HOUSE CONSERVATIVES FUND

A. Full Name (Last, First, Middle Initial)
Mr William Poya

Mailing Address 16851 Harlem Ave Apt 236

City State Zip Code
Tinley Park IL 60477-2736

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

Name of Employer information requested Occupation information requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 9

Transaction ID: SA11AI.25430

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Dr Chad Prusmack

Mailing Address 10450 Park Meadows Dr Ste 202

City State Zip Code
Littleton CO 80124-5528

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

Name of Employer information requested Occupation information requested
Rockey Mountain Spine Clinic Neurosurguer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 7 / 2 0 0 9

Transaction ID: SA11AI.25200

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Dr John Przygoda

Mailing Address 110 Pegwin Dr

City State Zip Code
East Greenwich RI 02818-2418

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

Name of Employer information requested Occupation information requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 7 / 2 0 0 9

Transaction ID: SA11AI.25216

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **525.00**

TOTAL 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: PAGE 39 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

A. Full Name (Last, First, Middle Initial)
Dr Adley Raboy

Mailing Address 55 Adlers Ln

City State Zip Code
Staten Island NY 10307-2217

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

Name of Employer information requested Occupation information requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 9

Transaction ID: SA11AI.25509

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Mrs Teresa Regard

Mailing Address 720 E Cherry Ln

City State Zip Code
Arlington Heights IL 60004-3217

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

Name of Employer information requested Occupation information requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 2 / 2 0 0 9

Transaction ID: SA11AI.25805

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Dr Carol Ridenour, MD

Mailing Address 7962 Wrenwood Blvd Apt B

City State Zip Code
Baton Rouge LA 70809-1769

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

Name of Employer information requested Occupation information requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 9

Transaction ID: SA11AI.25537

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **1350.00**

TOTAL 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: PAGE 40 / 69
(check only one)

<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)
HOUSE CONSERVATIVES FUND

A.

Full Name (Last, First, Middle Initial)
Mr John L Riegler, Jr

Mailing Address 6059 Mapleridge Dr

City State Zip Code
Flint MI 48532-2119

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

Name of Employer self Occupation
self retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 213.00

Date of Receipt
MM / DD / YYYY
12 / 01 / 2009

Transaction ID: SA11AI.26425

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Mr John L Riegler, Jr

Mailing Address 6059 Mapleridge Dr

City State Zip Code
Flint MI 48532-2119

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

Name of Employer self Occupation
self retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 243.00

Date of Receipt
MM / DD / YYYY
12 / 22 / 2009

Transaction ID: SA11AI.25681

Amount of Each Receipt this Period
30.00

C.

Full Name (Last, First, Middle Initial)
Mr Edward B Rogers, Jr

Mailing Address 511 First St

City State Zip Code
Coronado CA 92118

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

Name of Employer self Occupation
US Navy Captain USN (retired)

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
MM / DD / YYYY
12 / 29 / 2009

Transaction ID: SA11AI.26017

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **140.00**

TOTAL 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: PAGE 41 / 69
(check only one)

<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)
HOUSE CONSERVATIVES FUND

A.

Full Name (Last, First, Middle Initial)
Mr Raymond A Rowe

Mailing Address 49 Est E St

City State Zip Code
Encinitas CA 92024

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

Name of Employer retired Occupation retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
MM / DD / YYYY
12 / 22 / 2009

Transaction ID: SA11AI.25694

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
Dr Thomas Russell

Mailing Address 240 LaGrange Creek Dr

City State Zip Code
Eads TN 38028-8014

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

Name of Employer self Occupation orthopedic surgeon

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
12 / 28 / 2009

Transaction ID: SA11AI.25968

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Dr Denver Sallee

Mailing Address 145 Taylor Ridge Way

City State Zip Code
Alpharetta GA 30004-4259

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

Name of Employer information requested Occupation information requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
12 / 14 / 2009

Transaction ID: SA11AI.25482

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ▶ **550.00**

TOTAL 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: PAGE 42 / 69

(check only one)

<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)
HOUSE CONSERVATIVES FUND

A.

Full Name (Last, First, Middle Initial)

Dr Donald Sanders

Mailing Address 1 Stafford Ln

City State Zip Code
Oak Brook IL 60523-2366

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

Name of Employer information requested Occupation information requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 4 / 2 0 0 9

Transaction ID: SA11AI.25581

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Mr Edwin Sandham

Mailing Address 1964 SW Saint Andrews Dr

City State Zip Code
Palm City FL 34990-2210

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

Name of Employer retired Occupation retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 425.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 9 / 2 0 0 9

Transaction ID: SA11AI.26051

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)

Mr Edwin Sandham

Mailing Address 1964 SW Saint Andrews Dr

City State Zip Code
Palm City FL 34990-2210

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

Name of Employer retired Occupation retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 525.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 9 / 2 0 0 9

Transaction ID: SA11AI.26052

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

475.00

TOTAL 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: PAGE 43 / 69
(check only one)

<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)
HOUSE CONSERVATIVES FUND

A. Full Name (Last, First, Middle Initial)
Ms Carol Schulden

Mailing Address P O Box 155

City State Zip Code
Clear Brook VA 22624-0155

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

Name of Employer retired Occupation retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
12 / 14 / 2009

Transaction ID: SA11AI.25336

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Mrs Mabel Shuman

Mailing Address RR 1 Box 16

City State Zip Code
Sullivan IL 61951-8709

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

Name of Employer retired Occupation retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
12 / 03 / 2009

Transaction ID: SA11AI.26414

Amount of Each Receipt this Period
90.00

C. Full Name (Last, First, Middle Initial)
Mr Allen H Simon

Mailing Address 1383 N Criss St

City State Zip Code
Chandler AZ 85226-1307

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

Name of Employer retired Occupation retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt
MM / DD / YYYY
12 / 22 / 2009

Transaction ID: SA11AI.25827

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **240.00**

TOTAL 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: PAGE 44 / 69
(check only one)

<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)
HOUSE CONSERVATIVES FUND

A. Full Name (Last, First, Middle Initial)
Mrs Angela Skinner

Mailing Address 1530 Bayshore Blvd

City State Zip Code
Dunedin FL 34698-4219

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

Name of Employer information requested Occupation information requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
MM / DD / YYYY
12 / 22 / 2009

Transaction ID: SA11AI.25838

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
Dr. Charles Smith

Mailing Address 392 S Lakeshore Dr

City State Zip Code
Baton Rouge LA 70808-3620

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

Name of Employer information requested Occupation information requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: SA11AI.26085

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Dr. Robert Smith

Mailing Address 2965 Pickwick Dr

City State Zip Code
Columbus OH 43221-2925

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

Name of Employer information requested Occupation information requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
11 / 18 / 2009

Transaction ID: SA11AI.26505

Amount of Each Receipt this Period
250.00

This month HCF has received additional information from several contributors, which was requested in **[MEMO ITEM]**

SUBTOTAL of Receipts This Page (optional) ▶ **650.00**

TOTAL 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 45 / 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

A. Full Name (Last, First, Middle Initial)
Mr George Snell

Mailing Address 2201 Civic Cir Ste 508

City Amarillo State TX Zip Code 79109

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

Name of Employer Self Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: MM / DD / YYYY 12 / 01 / 2009

Transaction ID: SA11AI.26418

Amount of Each Receipt this Period 200.00

B. Full Name (Last, First, Middle Initial)
Mrs Lurlyne Snider

Mailing Address 434 Lorraine Dr

City Cape Girardeau State MO Zip Code 63701-4948

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

Name of Employer information requested Occupation information requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 226.00

Date of Receipt: MM / DD / YYYY 08 / 19 / 2009

Transaction ID: SA11AI.26506

Amount of Each Receipt this Period 51.00

This month HCF has received additional information from several contributors, which was requested in **[MEMO ITEM]**

C. Full Name (Last, First, Middle Initial)
Patrick Stanley

Mailing Address 5566 S Sage Way

City Gold Canyon State AZ Zip Code 85218

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

Name of Employer retired Occupation engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: MM / DD / YYYY 12 / 20 / 2009

Transaction ID: SA11AI.26486

Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ▶ 250.00

TOTAL 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: PAGE 46 / 69
(check only one)

<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)
HOUSE CONSERVATIVES FUND

A.

Full Name (Last, First, Middle Initial)
Mr A Stilson, Jr

Mailing Address 177 Glyn Carin Ln

City State Zip Code
Granville OH 43023

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

Name of Employer retired Occupation retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.25946

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Mr John Stirrup

Mailing Address 7914 Monterey Bay Dr

City State Zip Code
Jacksonville FL 32256-2934

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 9

Transaction ID: SA11AI.25342

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Mrs Ada A Strassenburgh

Mailing Address PO Box 608

City State Zip Code
Ocean View NJ 08230-0608

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

Name of Employer retired Occupation retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 850.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 9 / 2 0 0 9

Transaction ID: SA11AI.25330

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ▶ **400.00**

TOTAL 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: PAGE 47 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

A. Full Name (Last, First, Middle Initial)
Mr Robert Sunderland

Mailing Address 953 Pyrite Ave

City Henderson State NV Zip Code 89011

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

Name of Employer retired Occupation retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2950.00

Date of Receipt 12 / 29 / 2009
Transaction ID: SA11AI.26028
Amount of Each Receipt this Period 25.00

B. Full Name (Last, First, Middle Initial)
Mr Brian C Swartz

Mailing Address PO Box 770162

City Memphis State TN Zip Code 38177-0162

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

Name of Employer unemployed Occupation teacher

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 273.58

Date of Receipt 12 / 07 / 2009
Transaction ID: SA11AI.25147
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Mr Thomas Tanguay

Mailing Address 509 Sandy Run Church Rd

City Mooresboro State NC Zip Code 28114-8774

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

Name of Employer retired Occupation retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 31 / 2009
Transaction ID: SA11AI.26302
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 175.00

TOTAL 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: PAGE 48 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

A. Full Name (Last, First, Middle Initial)
Mr. Michael L Terstriep

Mailing Address 1205 Alydar Dr.

City State Zip Code
Mahomet IL 61853-3732

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

Name of Employer Occupation
retired retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 2 / 2 0 0 9

Transaction ID: SA11AI.25670

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Dr. Theodore Thompson

Mailing Address 21171 Sophie Dr

City State Zip Code
Abingdon VA 24211-7088

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

Name of Employer Occupation
information requested information requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 2 / 2 0 0 9

Transaction ID: SA11AI.25718

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mrs Gneal Trevethan

Mailing Address 2985 Catlett Rd

City State Zip Code
Pleasant Grove CA 95668-9741

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

Name of Employer Occupation
self Farmer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.26399

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **450.00**

TOTAL 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: PAGE 49 / 69
(check only one)

<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)
HOUSE CONSERVATIVES FUND

A. Full Name (Last, First, Middle Initial)
Dr Ethan L Trexler, MD

Mailing Address 1 Reading Dr Apt 45

City State Zip Code
Wernsville PA 19565-2019

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

Name of Employer information requested Occupation information requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt **12 / 03 / 2009**

Transaction ID: SA11AI.26404

Amount of Each Receipt this Period **50.00**

B. Full Name (Last, First, Middle Initial)
Mr Charles Valentine

Mailing Address 201 Caesars Ln Apt 18

City State Zip Code
New Windsor NY 12553-7749

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

Name of Employer US Postal Service Occupation Mail Carrier

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **850.00**

Date of Receipt **12 / 22 / 2009**

Transaction ID: SA11AI.25672

Amount of Each Receipt this Period **100.00**

C. Full Name (Last, First, Middle Initial)
Mr Joel Verplank

Mailing Address 214 Robinhood Dr

City State Zip Code
Florence AL 35633-1615

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

Name of Employer Verplank enterprises Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **12 / 24 / 2009**

Transaction ID: SA11AI.25898

Amount of Each Receipt this Period **500.00**

SUBTOTAL of Receipts This Page (optional) ► **650.00**

TOTAL 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: PAGE 50 / 69
(check only one)

<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)
HOUSE CONSERVATIVES FUND

A. Full Name (Last, First, Middle Initial)
Mr Fred Wadsworth

Mailing Address 153 Almond Ridge Dr

City State Zip Code
Fortson GA 31808-6821

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

Name of Employer information requested Occupation information requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **201.00**

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 14 / 2009

Transaction ID: SA11AI.25620

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Dr Micheal Walsh

Mailing Address 6432 Brookshire Dr

City State Zip Code
Dallas TX 75230-4102

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

Name of Employer excel aresthesis Occupation physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 07 / 2009

Transaction ID: SA11AI.25218

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Dr Edgar Weaver

Mailing Address 5304 Indian Grave Rd Ste A

City State Zip Code
Roanoke VA 24018-9100

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

Name of Employer information requested Occupation information requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 28 / 2009

Transaction ID: SA11AI.25970

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) **800.00**

TOTAL 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: PAGE 51 / 69
(check only one)

<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)
HOUSE CONSERVATIVES FUND

A.

Full Name (Last, First, Middle Initial)
Dr Neil Weiman

Mailing Address 4505 W Dale Ave

City Tampa State FL Zip Code 33609-3708

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

Name of Employer information requested Occupation information requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 07 / 2009

Transaction ID: SA11AI.25228

Amount of Each Receipt this Period 250.00

B.

Full Name (Last, First, Middle Initial)
Dr. Gary West

Mailing Address 8038 Wurzbach Rd Ste 270

City San Antonio State TX Zip Code 78229-3812

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

Name of Employer information requested Occupation information requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 31 / 2009

Transaction ID: SA11AI.26093

Amount of Each Receipt this Period 250.00

C.

Full Name (Last, First, Middle Initial)
Mr James Wheeler

Mailing Address 1848 Greenwood Dr

City Goshen State IN Zip Code 46526-9331

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

Name of Employer information requested Occupation information requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 07 / 2009

Transaction ID: SA11AI.25242

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 750.00

TOTAL 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:	PAGE 52 / 69
	(check only one)	
<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)
HOUSE CONSERVATIVES FUND

A.

Full Name (Last, First, Middle Initial)
Mr James Will

Mailing Address 2707 Garfield Rd

City Tacoma State WA Zip Code 98403-2919

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

Name of Employer retired Occupation retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 2 / 2 0 0 9

Transaction ID: SA11AI.25680

Amount of Each Receipt this Period
200.00

B.

Full Name (Last, First, Middle Initial)
Ms Lorraine Wink

Mailing Address 611 S Oakland Ave

City Villa Park State IL Zip Code 60181-3077

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

Name of Employer retired Occupation retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 2 / 2 0 0 9

Transaction ID: SA11AI.25762

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)	▶	220.00
TOTAL This Period (last page this line number only)	▶	24255.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 69
(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

A. Full Name (Last, First, Middle Initial)
AMERICAN FINANCIAL SERVICES ASSOCIATION PAC

Mailing Address 919 18th Street NW

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00038604

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: SA11C.26345
Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
AMERICAN SOCIETY OF ANESTHESIOLOGISTS PAC

Mailing Address 520 N NORTHWEST HIGHWAY

City PARK RIDGE State IL Zip Code 60068

FEC ID number of contributing federal political committee. **C** C70004684

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 12 / 31 / 2009
Transaction ID: SA11C.26347
Amount of Each Receipt this Period: 4000.00

C. Full Name (Last, First, Middle Initial)
ASSOCIATED BUILDERS AND CONTRACTORS PAC

Mailing Address 1300 NORTH 17TH STREET SUITE 800

City ROSSLYN State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C70003355

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 12 / 17 / 2009
Transaction ID: SA11C.26348
Amount of Each Receipt this Period: 2500.00

SUBTOTAL of Receipts This Page (optional) ► 7500.00

TOTAL 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: PAGE 54 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

A. Full Name (Last, First, Middle Initial)
EVERY REPUBLICAN IS CRUCIAL (ERICPAC)
Mailing Address 25 East Main Street, Suite 200

City Richmond State VA Zip Code 23219

FEC ID number of contributing federal political committee. **C** C00384701

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 2 9 / 2 0 0 9
Transaction ID: SA11C.26325
 Amount of Each Receipt this Period 5000.00

B. Full Name (Last, First, Middle Initial)
FRIENDS OF JEB HENSARLING
Mailing Address PO Box 820504

City Dallas State TX Zip Code 75382

FEC ID number of contributing federal political committee. **C** C00370650

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 1 7 / 2 0 0 9
Transaction ID: SA11C.26456
 Amount of Each Receipt this Period 5000.00

C. Full Name (Last, First, Middle Initial)
GLAXOSMITHKLINE LLC POLITICAL ACTION COMMITTEE (FKA SMITHKLINE BEECHAM CORP. PAC)
Mailing Address Five Moore Drive P.O. Box 13358
P.O. Box 13358

City Res. Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C** C00199703

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 2 3 / 2 0 0 9
Transaction ID: SA11C.26321
 Amount of Each Receipt this Period 2500.00

SUBTOTAL of Receipts This Page (optional) ► 12500.00

TOTAL 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: PAGE 55 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

A. Full Name (Last, First, Middle Initial)
HOME DEPOT INC. POLITICAL ACTION COMMITTEE, THE

Mailing Address 101 Constitution Ave. NW
Suite 800 West

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00284885

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11C.26343

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
INDEPENDENT COMMUNITY BANKERS OF AMERICA POLITICAL ACTION COMMITTEE

Mailing Address 1615 L Street, NW
Suite 900

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00032698

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 1 5 / 2 0 0 9

Transaction ID: SA11C.26386

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
NATIONAL RESTAURANT ASSOCIATION PAC

Mailing Address 1200 17th Street NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00003764

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 1 4 / 2 0 0 9

Transaction ID: SA11C.26388

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional) ► 10000.00

TOTAL 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: PAGE 56 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

A. Full Name (Last, First, Middle Initial)
PCIPAC - PROPERTY CASUALTY INSURERS ASSOC AMERICA PAC

Mailing Address 2600 South River Road

City State Zip Code
Des Plaines IL 60018

FEC ID number of contributing federal political committee. **C** C00066472

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 4 / 2 0 0 9

Transaction ID: SA11C.26341

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
PFIZER INC. PAC

Mailing Address 235 EAST 42ND STREET

City State Zip Code
NEW YORK NY 10017

FEC ID number of contributing federal political committee. **C** C00016683

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11C.26339

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
TOM ROONEY FOR CONGRESS

Mailing Address 2336 S. East Ocean Blvd. #313

City State Zip Code
Stuart FL 34996

FEC ID number of contributing federal political committee. **C** C00432906

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 3 / 2 0 0 9

Transaction ID: SA11C.26323

Amount of Each Receipt this Period
2000.00

SUBTOTAL of Receipts This Page (optional) ► 5500.00

TOTAL This Period (last page this line number only) ► 35500.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 57 / 69	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HOUSE CONSERVATIVES FUND

A.

Full Name (Last, First, Middle Initial) Integram		Date of Receipt
Mailing Address 8421 Hilltop Road		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
City Fairfax	State VA	Zip Code 22031
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID: SA15.26328
Name of Employer		Amount of Each Receipt this Period <input type="text" value="2.00"/>
Occupation		refund of postage
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1018.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="2.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="2.00"/>

**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"/> 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)
HOUSE CONSERVATIVES FUND

<p>A. Full Name (Last, First, Middle Initial) Advanced Mailing Services</p> <p>Mailing Address 14970 Farm Creek Drive</p> <p>City Woodbridge State VA Zip Code 22191</p> <p>Purpose of Disbursement HCF direct mail services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.26369</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="323.98"/></p>
<p>B. Full Name (Last, First, Middle Initial) Alliance Strategies Group, Inc.</p> <p>Mailing Address 7700 Congress Avenue SUite 2205</p> <p>City Boca Raton State FL Zip Code 33487</p> <p>Purpose of Disbursement HCF email fundraising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.26363</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="450.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) American Automated Mailing & Printing</p> <p>Mailing Address 9127 Antique Way</p> <p>City Manassas State VA Zip Code 20110</p> <p>Purpose of Disbursement HCF direct mail printing services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.26370</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="11144.28"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="11918.26"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**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 59 / 69

<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)
HOUSE CONSERVATIVES FUND

A.	Full Name (Last, First, Middle Initial) American Automated Mailing & Printing	Transaction ID: SB21B.26375 Date of Disbursement																			
	Mailing Address 9127 Antique Way	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	3		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	3		2	0	0	9												
	City Manassas State VA Zip Code 20110	Amount of Each Disbursement this Period																			
	Purpose of Disbursement direct mail - postage	<table border="1"><tr><td>11967.50</td></tr></table>	11967.50																		
11967.50																					
	Candidate Name	003 Category/ Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) American Caging Inc.	Transaction ID: SB21B.26358 Date of Disbursement																			
	Mailing Address 4850 Wright Road #168	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	9		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	9		2	0	0	9												
	City Stafford State TX Zip Code 77477	Amount of Each Disbursement this Period																			
	Purpose of Disbursement HCF direct mail processing/admin fees	<table border="1"><tr><td>5919.16</td></tr></table>	5919.16																		
5919.16																					
	Candidate Name	003 Category/ Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) American Caging Inc.	Transaction ID: SB21B.26359 Date of Disbursement																			
	Mailing Address 4850 Wright Road #168	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		3	1		2	0	0	9												
	City Stafford State TX Zip Code 77477	Amount of Each Disbursement this Period																			
	Purpose of Disbursement HCF direct mail processing/admin fees	<table border="1"><tr><td>1183.84</td></tr></table>	1183.84																		
1183.84																					
	Candidate Name	003 Category/ Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>19070.50</td></tr></table>	19070.50
19070.50		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**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 60 / 69

<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)
HOUSE CONSERVATIVES FUND

A. Full Name (Last, First, Middle Initial) Campaign Solutions Mailing Address 118 N St. Asaph Street City Alexandria State VA Zip Code 22314 Purpose of Disbursement HCF online fundraising Candidate Name	Transaction ID: SB21B.26316 Date of Disbursement 12 / 15 / 2009
	Amount of Each Disbursement this Period 60.50
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type 003

B. Full Name (Last, First, Middle Initial) Campaign Solutions Mailing Address 118 N St. Asaph Street City Alexandria State VA Zip Code 22314 Purpose of Disbursement HCF online fundraising Candidate Name	Transaction ID: SB21B.26312 Date of Disbursement 12 / 31 / 2009
	Amount of Each Disbursement this Period 400.50
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type 003

C. Full Name (Last, First, Middle Initial) Campaign Solutions Mailing Address 118 N St. Asaph Street City Alexandria State VA Zip Code 22314 Purpose of Disbursement HCF online fundraising credit card fees Candidate Name	Transaction ID: SB21B.26313 Date of Disbursement 12 / 31 / 2009
	Amount of Each Disbursement this Period 1.84
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type 003

SUBTOTAL of Disbursements This Page (optional) ▶	462.84
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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)
HOUSE CONSERVATIVES FUND

A.	Full Name (Last, First, Middle Initial) Capitol Resources	Transaction ID: SB21B.26366 Date of Disbursement 12 / 21 / 2009
	Mailing Address 700 East Pleasant Street P.O. Box 257	Amount of Each Disbursement this Period 896.34
	City Brooklyn State IA Zip Code 52211	
	Purpose of Disbursement HCF telephone fundraising Candidate Name	003 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) ccAdvertising	Transaction ID: SB21B.26360 Date of Disbursement 12 / 21 / 2009
	Mailing Address 13800 Coppermine Road	Amount of Each Disbursement this Period 1000.00
	City Herndon State VA Zip Code 20171	
	Purpose of Disbursement HCF telemarketing/direct mail service Candidate Name	003 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Communications Corporation of America	Transaction ID: SB21B.26396 Date of Disbursement 12 / 10 / 2009
	Mailing Address 13195 Freedom Way	Amount of Each Disbursement this Period 2990.10
	City Boston State VA Zip Code 22713	
	Purpose of Disbursement direct mail - postage Candidate Name	003 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	4886.44
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)

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<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)
HOUSE CONSERVATIVES FUND

A.	Full Name (Last, First, Middle Initial) Deluxe Business Solutions	Transaction ID: SB21B.26315 Date of Disbursement																			
	Mailing Address P.O. Box 742572	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	0		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	0		2	0	0	9												
	City Cincinnati State OH Zip Code 45274	Amount of Each Disbursement this Period																			
	Purpose of Disbursement HCF - bank checks	<table border="1"><tr><td>101.80</td></tr></table>	101.80																		
101.80																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

B.	Full Name (Last, First, Middle Initial) Direct Concepts	Transaction ID: SB21B.26371 Date of Disbursement																			
	Mailing Address 44084 Riverside Parkway Suite 350	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	1		2	0	0	9												
	City Lansdowne State VA Zip Code 20176	Amount of Each Disbursement this Period																			
	Purpose of Disbursement direct mail - artwork	<table border="1"><tr><td>2175.00</td></tr></table>	2175.00																		
2175.00																					
	Candidate Name	<table border="1"><tr><td>003</td></tr></table> Category/Type	003																		
003																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

C.	Full Name (Last, First, Middle Initial) Patriot Data Services	Transaction ID: SB21B.26361 Date of Disbursement																			
	Mailing Address Two Riverbend 44084 Riverside Pkwy	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	1		2	0	0	9												
	City Lansdowne State VA Zip Code 20176	Amount of Each Disbursement this Period																			
	Purpose of Disbursement HCF domain registrations	<table border="1"><tr><td>40.00</td></tr></table>	40.00																		
40.00																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>2316.80</td></tr></table>	2316.80
2316.80		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**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)
HOUSE CONSERVATIVES FUND

A.	Full Name (Last, First, Middle Initial) Patriot Data Services	Transaction ID: SB21B.26373 Date of Disbursement 12 / 21 / 2009
	Mailing Address Two Riverbend 44084 Riverside Pkwy	Amount of Each Disbursement this Period 3123.54
	City Lansdowne State VA Zip Code 20176	
	Purpose of Disbursement HCF data management direct mail	003 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) PayPal, Inc.	Transaction ID: SB21B.26468 Date of Disbursement 12 / 01 / 2009
	Mailing Address P.O. Box 45950	Amount of Each Disbursement this Period 30.00
	City Omaha State NE Zip Code 68145-0950	
	Purpose of Disbursement HCF website e-commerce monthly fee	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) PayPal, Inc.	Transaction ID: SB21B.26467 Date of Disbursement 12 / 31 / 2009
	Mailing Address P.O. Box 45950	Amount of Each Disbursement this Period 13.73
	City Omaha State NE Zip Code 68145-0950	
	Purpose of Disbursement transaction fees for HCF contributions	003 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	3167.27
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"/> 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)
HOUSE CONSERVATIVES FUND

A.	Full Name (Last, First, Middle Initial) Robertson Mailing List Company Mailing Address Two Riverbend 44084 Riverside Pkwy Suite 350 City Landsdowne State VA Zip Code 20176-6823 Purpose of Disbursement HCF mailing list services Candidate Name 003 Category/ Type Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB21B.26374 Date of Disbursement 1 2 / 2 1 / 2 0 0 9 Amount of Each Disbursement this Period 8877.18
B.	Full Name (Last, First, Middle Initial) Sederholm Public Affairs, Inc. Mailing Address 675 N Washington Street Suite 410 City Alexandria State VA Zip Code 22314 Purpose of Disbursement HCF Management/Admin Fees Candidate Name 001 Category/ Type Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB21B.26356 Date of Disbursement 1 2 / 1 7 / 2 0 0 9 Amount of Each Disbursement this Period 1000.00
C.	Full Name (Last, First, Middle Initial) The Kozlow Group, Inc. Mailing Address 22714 Dexter House Terrace City Ashburn State VA Zip Code 20148 Purpose of Disbursement HCF general consulting fees Candidate Name 001 Category/ Type Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB21B.26451 Date of Disbursement 1 2 / 0 1 / 2 0 0 9 Amount of Each Disbursement this Period 3000.00

SUBTOTAL of Disbursements This Page (optional) ▶

12877.18

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"/> 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)
HOUSE CONSERVATIVES FUND

<p>A. Full Name (Last, First, Middle Initial) The Kozlow Group, Inc.</p> <p>Mailing Address 22714 Dexter House Terrace</p> <p>City Ashburn State VA Zip Code 20148</p> <p>Purpose of Disbursement HCF general consulting fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.26355</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3000.00"/></p> <p><input type="text" value="001"/> Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) The Oorbeek Group</p> <p>Mailing Address 3140 W. Ward Road Suite 201</p> <p>City Dunkirk State MD Zip Code 20754</p> <p>Purpose of Disbursement HCF general-political consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.26450</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3250.00"/></p> <p><input type="text" value="003"/> Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) The Oorbeek Group</p> <p>Mailing Address 3140 W. Ward Road Suite 201</p> <p>City Dunkirk State MD Zip Code 20754</p> <p>Purpose of Disbursement HCF general-political consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.26362</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3250.00"/></p> <p><input type="text" value="003"/> Category/Type</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="9500.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value=""/></p>

**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)

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<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)
HOUSE CONSERVATIVES FUND

A.

Full Name (Last, First, Middle Initial)
The Richard Norman Company

Transaction ID: SB21B.26365
Date of Disbursement

Mailing Address 44084 Riverside Parkway, #350

12 / 21 / 2009

City Lansdowne State VA Zip Code 20176

Amount of Each Disbursement this Period

4534.51

Purpose of Disbursement
direct mail services

003
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Valley Press Inc.

Transaction ID: SB21B.26368
Date of Disbursement

Mailing Address 17 Warren Road
Suite 25A

12 / 21 / 2009

City Baltimore State MD Zip Code 21208

Amount of Each Disbursement this Period

1012.73

Purpose of Disbursement
direct mail services

003
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Wachovia Bank NA

Transaction ID: SB21B.26314
Date of Disbursement

Mailing Address P.O. Box 563966

12 / 09 / 2009

City Charlotte State NC Zip Code 28256

Amount of Each Disbursement this Period

153.28

Purpose of Disbursement
commercial bank service fees

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

5700.52

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

69899.81

**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 67 / 69

<input 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 checked="" 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)
HOUSE CONSERVATIVES FUND

<p>A. Full Name (Last, First, Middle Initial) Maria El Charif, MD</p> <p>Mailing Address 5251 Foxchase Ave NW</p> <p>City Canton State OH Zip Code 44718-1588</p> <p>Purpose of Disbursement refund of contribution - orig disclosed Sept 09</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB28A.26442</p> <p>Date of Disbursement 12 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>010 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Eric Guerra, M.D.</p> <p>Mailing Address 4440 Garner PI</p> <p>City Bartlett State TN Zip Code 38135-1203</p> <p>Purpose of Disbursement refund of contribution - orig disclosed Sept 09</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB28A.26437</p> <p>Date of Disbursement 12 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>010 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Dianne Kamenetsky, M D</p> <p>Mailing Address 10870 Brockway Rd</p> <p>City Truckee State CA Zip Code 96161-2054</p> <p>Purpose of Disbursement refund of contribution - orig disclosed Sept 09</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB28A.26427</p> <p>Date of Disbursement 12 / 07 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>010 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

750.00

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)

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<input 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 checked="" 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)
HOUSE CONSERVATIVES FUND

A.	Full Name (Last, First, Middle Initial) Dr Greg Kang	Transaction ID: SB28A.26443 Date of Disbursement 12 / 03 / 2009
	Mailing Address P O Box 811	
	City Murrells Inlet State SC Zip Code 29576-0811	Amount of Each Disbursement this Period 250.00
	Purpose of Disbursement refund of contribution - orig disclosed Sept 09 Candidate Name	010 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Mr David W Light, III	Transaction ID: SB28A.26433 Date of Disbursement 12 / 03 / 2009
	Mailing Address 301 Mayerling Dr	
	City Houston State TX Zip Code 77024-6417	Amount of Each Disbursement this Period 275.00
	Purpose of Disbursement refund of contribution - orig disclosed Feb 09 Candidate Name	010 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Purvisha Patel, MD	Transaction ID: SB28A.26440 Date of Disbursement 12 / 03 / 2009
	Mailing Address 859 Harbor Bend Rd	
	City Memphis State TN Zip Code 38103-0820	Amount of Each Disbursement this Period 250.00
	Purpose of Disbursement refund of contribution - orig disclosed Sept 09 Candidate Name	010 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

775.00

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)

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<input 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 checked="" 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)
HOUSE CONSERVATIVES FUND

A.	Full Name (Last, First, Middle Initial) Dr Kerry Rifkin, MD	Transaction ID: SB28A.26439
	Mailing Address 2140 Kingsley Ave Ste 14	Date of Disbursement MM / DD / YYYY 12 / 03 / 2009
	City Orange Park State FL Zip Code 32073-5129	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement refund of contribution - orig disclosed Sept 09	010 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Ellen Turner, MD	Transaction ID: SB28A.26441
	Mailing Address 4520 Mockingbird Ln	Date of Disbursement MM / DD / YYYY 12 / 03 / 2009
	City Dallas State TX Zip Code 75205-2620	Amount of Each Disbursement this Period 250.00
	Purpose of Disbursement refund of contribution - orig disclosed Sept 09	010 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

750.00

TOTAL This Period (last page this line number only)

2275.00