

**FEC  
FORM 3X**

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

RECEIVED

2013 APR 19 AM 9:36  
Office Use Only

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

**CONSERVATIVE NATIONAL COMMITTEE**

ADDRESS (number and street) **PO BOX 101326**  
 Check if different than previously reported. (ACC)  
**ARLINGTON VA 22210**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C00139097**

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- |   |                                      |                                       |  |
|---|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2)            | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3)            | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input checked="" type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                           |

- (c) 12-Day PRE-Election Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) |                                       |

Election on  /  /  in the State of

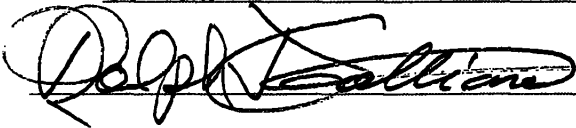
- (d) 30-Day POST-Election Report for the:
- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on  /  /  in the State of

5. Covering Period **03 ' 01 ' 2013** through **03 ' 31 ' 2013**

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

Type or Print Name of Treasurer **RALPH J. GALLIANO**

Signature of Treasurer  Date **04 ' 18 ' 2013**

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

Office Use Only							
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**FEC FORM 3X**  
Rev. 12/2004

13031061124

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**CONSERVATIVE NATIONAL COMMITTEE**

Report Covering the Period:

From:

**03 / 01 / 2013**

To:

**03 / 31 / 2013**

**COLUMN A  
This Period**

**COLUMN B  
Calendar Year-to-Date**

6. (a) Cash on Hand January 1, <b>2013</b>		<b>10333</b>
(b) Cash on Hand at Beginning of Reporting Period.....	<b>9933</b>	
(c) Total Receipts (from Line 19) .....	<b>0</b>	<b>0</b>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<b>9933</b>	<b>10333</b>
7. Total Disbursements (from Line 31).....	<b>200</b>	<b>600</b>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<b>9733</b>	<b>9733</b>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....	<b>0</b>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....	<b>9493082</b>	



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

13031061125

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**CONSERVATIVE NATIONAL COMMITTEE**

Report Covering the Period: From: **03 ' 01 ' 2013** To: **03 ' 31 ' 2013**

**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).....

0

0

(ii) Unitemized.....

0

0

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

0

0

(b) Political Party Committees.....

0

0

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

0

0

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

0

0

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

0

0

**13. All Loans Received.....**

0

0

**14. Loan Repayments Received.....**

0

0

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

0

0

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

0

0

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

0

0

**18. Transfers from Non-Federal and Levin Funds**

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

0

0

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

0

0

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

0

0

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

0

0

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

0

0

13031061126

## DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

13031061127

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....		
(ii) Non-Federal Share .....		
(b) Other Federal Operating Expenditures .....		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	200	600
22. Transfers to Affiliated/Other Party Committees .....		
23. Contributions to Federal Candidates/Committees and Other Political Committees .....		
24. Independent Expenditures (use Schedule E) .....		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F) .....		
26. Loan Repayments Made .....		
27. Loans Made .....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....		
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs) .....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0	0
29. Other Disbursements .....		
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....		
(ii) "Levin" Share .....		
(b) Federal Election Activity Paid Entirely With Federal Funds .....		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	200	600
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) .....	200	600

DETAILED SUMMARY PAGE

of Disbursements

III. Net Contributions/Operating Expenditures

COLUMN A  
Total This Period

COLUMN B  
Calendar Year-to-Date

- 33. Total Contributions (other than loans)  
(from Line 11(d), page 3) .....
- 34. Total Contribution Refunds  
(from Line 28(d)) .....
- 35. Net Contributions (other than loans)  
(subtract Line 34 from Line 33) .....
- 36. Total Federal Operating Expenditures  
(add Line 21(a)(i) and Line 21(b)) .....
- 37. Offsets to Operating Expenditures  
(from Line 15, page 3) .....
- 38. Net Operating Expenditures  
(subtract Line 37 from Line 36) .....

0
0
0
200
0
200

0
0
0
600
0
600

13031061128

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)						PAGE	OF
	<input checked="" type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input type="checkbox"/> 20 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b		

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**CONSERVATIVE NATIONAL COMMITTEE**

**A.** Full Name (Last, First, Middle Initial) **BB#T**

Mailing Address **P.O. BOX 819**

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

Purpose of Disbursement **SERVICE CHARGE**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement **03 / 22 / 2013**

Amount of Each Disbursement this Period **2.00**

Category/Type **001**

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

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

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

**2.00**

13031061129

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

NAME OF COMMITTEE (In Full)  
**CONSERVATIVE NATIONAL COMMITTEE**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>OMEGA HST COMPANY</b>	Nature of Debt (Purpose): <b>LIST RENTAL</b>
Mailing Address <b>1430 Springhill Road # 490</b>	
City State Zip Code <b>McLean VA 22102</b>	

Outstanding Balance Beginning This Period <b>19,269.39</b>	Payment This Period <b>0</b>	Outstanding Balance at Close of This Period <b>19,269.39</b>
Amount Incurred This Period <b>0</b>		

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Bruce W. Eberle &amp; Associates</b>	Nature of Debt (Purpose): <b>Fundraising</b>
Mailing Address <b>1430 Springhill Road # 490</b>	
City State Zip Code <b>McLean VA 22102</b>	

Outstanding Balance Beginning This Period <b>17,974.00</b>	Payment This Period <b>0</b>	Outstanding Balance at Close of This Period <b>17,974.00</b>
Amount Incurred This Period <b>0</b>		

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>GRAPHICS</b>	Nature of Debt (Purpose): <b>Graphics</b>
Mailing Address <b>8330 Old Courthouse Road</b>	
City State Zip Code	

Outstanding Balance Beginning This Period <b>3,915.60</b>	Payment This Period <b>0</b>	Outstanding Balance at Close of This Period <b>3,915.60</b>
Amount Incurred This Period <b>0</b>		

1) SUBTOTALS This Period This Page (optional).....▶	<b>21,458.35</b>
2) TOTALS This Period (last page this line number only).....▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)▶	

13031061130

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

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

FOR LINE NUMBER:  
 (check only one)

9  
 40

NAME OF COMMITTEE (In Full)

**CONSERVATIVE NATIONAL COMMITTEE**

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

**CCI**

Nature of Debt (Purpose):

**Computer Printing**

Mailing Address

**8330 Old Courthouse Road**

City

**Vienna VA**

Zip Code

**22180**

Outstanding Balance Beginning This Period

**1,538.77**

Amount Incurred This Period

**0**

Payment This Period

**0**

Outstanding Balance at Close of This Period

**1,538.77**

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

**WIB**

Nature of Debt (Purpose):

**Mailing Services**

Mailing Address

**2727 Merrilee Drive**

City

**Fairfax VA**

Zip Code

**22031**

Outstanding Balance Beginning This Period

**11,227.10**

Amount Incurred This Period

**0**

Payment This Period

**0**

Outstanding Balance at Close of This Period

**11,227.10**

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

**ARICO Systems**

Nature of Debt (Purpose):

**Computer Printing**

Mailing Address

**2853 Nutley Street**

City

**Fairfax VA 22031**

State

Zip Code

Outstanding Balance Beginning This Period

**11,651.63**

Amount Incurred This Period

**0**

Payment This Period

**0**

Outstanding Balance at Close of This Period

**11,651.63**

- 1) SUBTOTALS This Period This Page (optional)..... ▶
- 2) TOTALS This Period (last page this line number only)..... ▶
- 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... ▶
- 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

**24,417.50**

13031061131



**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9  
410

NAME OF COMMITTEE (In Full)

**CONSERVATIVE NATIONAL COMMITTEE**

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

**ANDREWS REPRODUCTION CENTER**

Nature of Debt (Purpose):

**PRINTING**

Mailing Address

**10101-J BACON DRIVE**

City

**BELTSVILLE**

State

Zip Code

**MD 20705**

Outstanding Balance Beginning This Period

**609720**

Amount Incurred This Period

**0**

Payment This Period

**0**

Outstanding Balance at Close of This Period

**609720**

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

**Carter, Kent & Sullivan**

Nature of Debt (Purpose):

**Legal Services**

Mailing Address

**2020 K Street NW**

City

**Washington DC**

State

Zip Code

**20006**

Outstanding Balance Beginning This Period

**2825988**

Amount Incurred This Period

**0**

Payment This Period

**0**

Outstanding Balance at Close of This Period

**2825988**

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

**Southeast Printing**

Nature of Debt (Purpose):

**Printing**

Mailing Address

**2401 Wilson Blvd.**

City

**Arlington**

State

**VA**

Zip Code

**22201**

Outstanding Balance Beginning This Period

**39906**

Amount Incurred This Period

**0**

Payment This Period

**0**

Outstanding Balance at Close of This Period

**39906**

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

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

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

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

**3475614**

13031061132

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

Excluding Loans

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

PAGE **4** OF **5**

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**CONSERVATIVE NATIONAL COMMITTEE**

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

**Diversified Mailing Services**

Nature of Debt (Purpose):

**Mailing Services**

Mailing Address

**4333 Davenport Road**

City

State

Zip Code

**Fredericksburg VA 22401**

Outstanding Balance Beginning This Period

**44316**

Amount Incurred This Period

**0**

Payment This Period

**0**

Outstanding Balance at Close of This Period

**44316**

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

**Sir Speedy Printing Centers**

Nature of Debt (Purpose):

**Printing**

Mailing Address

**5881 Leesburg Pike**

City

State

Zip Code

**Falls Church VA 22041**

Outstanding Balance Beginning This Period

**89522**

Amount Incurred This Period

**0**

Payment This Period

**0**

Outstanding Balance at Close of This Period

**89522**

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

**Saturn Corporation**

Nature of Debt (Purpose):

**Computer Services**

Mailing Address

**4701 Lydell Road**

City

State

Zip Code

**Cheverly MD 20781**

Outstanding Balance Beginning This Period

**97882**

Amount Incurred This Period

**0**

Payment This Period

**0**

Outstanding Balance at Close of This Period

**97882**

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

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

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

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

**229720**

13031061133

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

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

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

FOR LINE NUMBER:  
(check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
**Conservative National Committee**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>James K. Jeanblanc</b>		Nature of Debt (Purpose): <b>Legal Services</b>
Mailing Address <b>1730 M St. NW</b>		
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20036</b>
Outstanding Balance Beginning This Period <b>1200163</b>		
Amount Incurred This Period <b>0</b>	Payment This Period <b>0</b>	Outstanding Balance at Close of This Period <b>1200163</b>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State	Zip Code
Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State	Zip Code
Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ▶	<b>1200163</b>
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<b>9493082</b>

13031061134

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

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked  
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): *fed Ex* Shipping Date  
*4/18/13*  
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

  
 PREPARER

*4/19/13*  
 DATE PREPARED

13031061135