

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, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post-Election Report for the: General, Runoff, Special Election on 11 07 2006 in the State of

5. Covering Period 10 01 2006 through 10 18 2006

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 Nancy H. Watkins Signature of Treasurer Electronically Filed by Nancy H. Watkins Date 10 25 2006

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
House Conservatives Fund

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
1	0

D	D
1	8

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><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>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		86198.03
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	99443.22									
(c) Total Receipts (from Line 19) .....	15207.00	334190.94								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	114650.22	420388.97								
7. Total Disbursements (from Line 31) .....	69643.89	375382.64								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	45006.33	45006.33								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> 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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
House Conservatives Fund

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
1	0

D	D
1	8

Y	Y	Y	Y
2	0	0	6

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	3845.00	45745.00
(i) Itemized (use Schedule A) .....	11362.00	75073.50
(ii) Unitemized .....	15207.00	120818.50
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	213372.34
(c) Other Political Committees (such as PACs) .....	15207.00	334190.84
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
12. Transfers From Affiliated/Other Party Committees .....	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) .....	0.00	0.10
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)) .....	15207.00	334190.94
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	15207.00	334190.94

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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.....	24643.89	234382.64
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	24643.89	234382.64
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	45000.00	141000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
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 .....	0.00	0.00
(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)) .....	0.00	0.00
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))..	69643.89	375382.64
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	69643.89	375382.64

**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) .....	15207.00	334190.84
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	15207.00	334190.84
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	24643.89	234382.64
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.10
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	24643.89	234382.54

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 20
	<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	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Alfred Anding		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 4921 Tonyawatha Trl		<b>Transaction ID:</b> C-66-01Ph01
City Monona	State WI	Zip Code 53716
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer n/a	Occupation retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Elliott Baines		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 6 / 2 0 0 6
Mailing Address 360 Indian Harbor Rd		<b>Transaction ID:</b> C-120-01PB01
City Vero Beach	State FL	Zip Code 32963
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer n/a	Occupation retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Elliott Baines		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 2 / 2 0 0 6
Mailing Address 360 Indian Harbor Rd		<b>Transaction ID:</b> C-122-01PB03
City Vero Beach	State FL	Zip Code 32963
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer n/a	Occupation retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1750.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 20
	<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) Margaret Cavney Mailing Address 546 Dalewood Ln City Hinsdale State IL Zip Code 60521 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 <b>Transaction ID: C-437-01OQ01</b> Amount of Each Receipt this Period 500.00
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00

B. Full Name (Last, First, Middle Initial) Lois Crantz Mailing Address 617 Terra California Dr Apt 6 City Walnut Creek State CA Zip Code 94595 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 2 / 2 0 0 6 <b>Transaction ID: C-585-01KJ01</b> Amount of Each Receipt this Period 35.00
Name of Employer Occupation n/a retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 285.00

C. Full Name (Last, First, Middle Initial) Werner Holzer Mailing Address 39262 Se Luz Rd City Fallbrook State CA Zip Code 92028 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 <b>Transaction ID: C-1283-01Pz01</b> Amount of Each Receipt this Period 1000.00
Name of Employer Occupation n/a retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1535.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 / 20
	(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)  
Ray Oden

Mailing Address 702 Thora Blvd

City State Zip Code  
Shreveport LA 71106

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

Name of Employer n/a 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
1	0		0	4		2	0	0	6

Transaction ID: C-2038-01KY01

Amount of Each Receipt this Period  
500.00

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

Mailing Address 120 Enchanted Ct S

City State Zip Code  
Burlleson TX 76028

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

Name of Employer Alcon Laboratories Occupation microbiologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	3		2	0	0	6

Transaction ID: C-2411-01Nk01

Amount of Each Receipt this Period  
60.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	560.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	3845.00

**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

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NAME OF COMMITTEE (In Full)  
House Conservatives Fund

Full Name (Last, First, Middle Initial) <b>A. American Caging, Inc.</b>		<b>Transaction ID:</b> D12-00fv07	
Mailing Address 4850 Wright Road, #168		Date of Disbursement 10 / 04 / 2006	
City Stafford	State TX	Zip Code 77477	Amount of Each Disbursement this Period 778.51
Purpose of Disbursement database services		Category/ Type	
Candidate Name			
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:			

Full Name (Last, First, Middle Initial) <b>B. American Caging, Inc.</b>		<b>Transaction ID:</b> D13-00fv08	
Mailing Address 4850 Wright Road, #168		Date of Disbursement 10 / 12 / 2006	
City Stafford	State TX	Zip Code 77477	Amount of Each Disbursement this Period 570.01
Purpose of Disbursement database services		Category/ Type	
Candidate Name			
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:			

Full Name (Last, First, Middle Initial) <b>C. Mike Bober</b>		<b>Transaction ID:</b> D45-00dz0D	
Mailing Address 803 7th St NE #4		Date of Disbursement 10 / 02 / 2006	
City Washington	State DC	Zip Code 20002	Amount of Each Disbursement this Period 2500.00
Purpose of Disbursement PAC management		Category/ Type	
Candidate Name			
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>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3848.52</b>
<b>TOTAL</b> 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)

PAGE 10 / 20

<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

Full Name (Last, First, Middle Initial) <b>A. Campaign Solutions</b>		<b>Transaction ID:</b> D53-004I04 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 118 N. Saint Asaph Street		Amount of Each Disbursement this Period 31.00
City Alexandria State VA Zip Code 22314	Purpose of Disbursement online fundraising	
Candidate Name		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) ▼	

Full Name (Last, First, Middle Initial) <b>B. The Design Studio</b>		<b>Transaction ID:</b> D87-011G01 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6
Mailing Address 10717 Oak Place		Amount of Each Disbursement this Period 330.00
City Fairfax State VA Zip Code 22030	Purpose of Disbursement direct mail services	
Candidate Name		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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Direct Concepts</b>		<b>Transaction ID:</b> D89-00eS02 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6
Mailing Address 44084 Riverside Pkwy., #350		Amount of Each Disbursement this Period 200.00
City Lansdowne State VA Zip Code 20176	Purpose of Disbursement artwork	
Candidate Name		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>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	561.00
<b>TOTAL</b> 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)

PAGE 11 / 20

<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

Full Name (Last, First, Middle Initial) <b>A. Tom Feeny</b>		<b>Transaction ID:</b> D99-00d401 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6
Mailing Address 3994 Carnaby Street		Amount of Each Disbursement this Period 644.88
City Oviedo State FL Zip Code 32765	Purpose of Disbursement see memo entries 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) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>B. The Biltmore Hotel</b>		<b>Transaction ID:</b> D2-011J01 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6
Mailing Address 1200 Anastasia Avenue		Amount of Each Disbursement this Period 491.77
City Coral Gables State FL Zip Code 33134	Purpose of Disbursement travel 9/18/06 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) ▼	[MEMO ITEM] Memo

Full Name (Last, First, Middle Initial) <b>C. The Biltmore Hotel</b>		<b>Transaction ID:</b> D3-011J02 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6
Mailing Address 1200 Anastasia Avenue		Amount of Each Disbursement this Period 26.22
City Coral Gables State FL Zip Code 33134	Purpose of Disbursement travel 9/18/06 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) ▼	[MEMO ITEM] Memo

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	644.88
<b>TOTAL</b> 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)

PAGE 12 / 20

<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

Full Name (Last, First, Middle Initial) <b>A. J &amp; N Printing</b>		<b>Transaction ID:</b> D114-011H01 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6
Mailing Address 5495 Glenthorne Court		Amount of Each Disbursement this Period 3236.50
City White Marsh State MD Zip Code 21237	Category/ Type	
Purpose of Disbursement printing		
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) ▼	

Full Name (Last, First, Middle Initial) <b>B. The Richard Norman Company</b>		<b>Transaction ID:</b> D135-00g402 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6
Mailing Address 44084 Riverside Parkway, #350		Amount of Each Disbursement this Period 4260.00
City Lansdowne State VA Zip Code 20176	Category/ Type	
Purpose of Disbursement direct mail services		
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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Patriot Data Services</b>		<b>Transaction ID:</b> D140-010x02 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 6
Mailing Address 44084 Riverside Parkway, #350		Amount of Each Disbursement this Period 501.34
City Lansdowne State VA Zip Code 20176	Category/ Type	
Purpose of Disbursement direct mail services		
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>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	7997.84
<b>TOTAL</b> 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)

PAGE 13 / 20

<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

Full Name (Last, First, Middle Initial) <b>A. Patton Boggs, LLP</b>		<b>Transaction ID: D144-00eR04</b> Date of Disbursement 10 / 06 / 2006	
Mailing Address 2550 M Street, N.W.		Amount of Each Disbursement this Period 181.82	
City Washington State DC Zip Code 20037	Purpose of Disbursement legal services	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) ▼		

Full Name (Last, First, Middle Initial) <b>B. Printing Express</b>		<b>Transaction ID: D151-00wG02</b> Date of Disbursement 10 / 04 / 2006	
Mailing Address 1832 S. Main Street		Amount of Each Disbursement this Period 1160.84	
City Harrisonburg State VA Zip Code 22801	Purpose of Disbursement printing	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) ▼		

Full Name (Last, First, Middle Initial) <b>C. Robertson Mailing List Company</b>		<b>Transaction ID: D157-00g302</b> Date of Disbursement 10 / 04 / 2006	
Mailing Address 44084 Riverside Parkway, #350		Amount of Each Disbursement this Period 3395.00	
City Lansdowne State VA Zip Code 20176	Purpose of Disbursement direct mail services	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>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>4737.66</b>
<b>TOTAL</b> 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

Full Name (Last, First, Middle Initial) <b>A. Townhall.com</b>		Transaction ID: D182-011K01 Date of Disbursement 10 / 12 / 2006	
Mailing Address 1004 Woodmont Blvd., #300		Amount of Each Disbursement this Period 3200.00	
City Nashville State TN Zip Code 37205	Purpose of Disbursement advertising	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) ▼		

Full Name (Last, First, Middle Initial) <b>B. Tri-State Envelope Corporation</b>		Transaction ID: D184-00g502 Date of Disbursement 10 / 04 / 2006	
Mailing Address P.O. Box 433		Amount of Each Disbursement this Period 3543.75	
City Beltsville State MD Zip Code 20704	Purpose of Disbursement direct mail services	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) ▼		

Full Name (Last, First, Middle Initial) <b>C. Wachovia Bank</b>		Transaction ID: D208-00es05 Date of Disbursement 10 / 11 / 2006	
Mailing Address P. O. Box 40031		Amount of Each Disbursement this Period 110.24	
City Roanoke State VA Zip Code 24022	Purpose of Disbursement service charge	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>6853.99</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>24643.89</b>

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

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NAME OF COMMITTEE (In Full)  
House Conservatives Fund

Full Name (Last, First, Middle Initial) <b>A. Bachmann for Congress</b>		Transaction ID: D20-00eN02 Date of Disbursement 10 / 10 / 2006
Mailing Address P.O. Box 49756		Amount of Each Disbursement this Period 5000.00
City Blaine State MN Zip Code 55449	Purpose of Disbursement contribution-MN(06) Candidate Name Michele M. Bachmann Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District:	
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Category/Type		

Full Name (Last, First, Middle Initial) <b>B. Vern Buchanan for Congress</b>		Transaction ID: D46-01Q801 Date of Disbursement 10 / 10 / 2006
Mailing Address P. O. Box 48928		Amount of Each Disbursement this Period 5000.00
City Sarasota State FL Zip Code 34230	Purpose of Disbursement contribution-FL(13) Candidate Name Vernon Buchanan Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 13	
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Category/Type		

Full Name (Last, First, Middle Initial) <b>C. Chris Chocola for Congress</b>		Transaction ID: D61-011M01 Date of Disbursement 10 / 13 / 2006
Mailing Address P.O. Box 6728		Amount of Each Disbursement this Period 5000.00
City South Bend State IN Zip Code 46660	Purpose of Disbursement contribution-IN(02) Candidate Name Christopher J. Chocola Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 2	
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Category/Type		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	15000.00
<b>TOTAL</b> 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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
House Conservatives Fund

Full Name (Last, First, Middle Initial) <b>A. John G. Gard</b>		<b>Transaction ID: D107-01QA01</b> Date of Disbursement 10 / 10 / 2006	
Mailing Address P. O. Box 277		Amount of Each Disbursement this Period 5000.00	
City Green Bay State WI Zip Code 54305	Purpose of Disbursement contribution-WI(08) Candidate Name John G. Gard Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 8	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Ray Meier for Congress</b>		<b>Transaction ID: D128-00wB02</b> Date of Disbursement 10 / 10 / 2006	
Mailing Address P. O. Box 120		Amount of Each Disbursement this Period 5000.00	
City Utica State NY Zip Code 13503	Purpose of Disbursement contribution-NY(24) Candidate Name Raymond A. Meier Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 24	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. Musgrave for Congress</b>		<b>Transaction ID: D131-001G02</b> Date of Disbursement 10 / 13 / 2006	
Mailing Address 118 W. Charlotte Street		Amount of Each Disbursement this Period 5000.00	
City Johnstown State CO Zip Code 80534	Purpose of Disbursement contribution-CO(04) Candidate Name Marilyn N. Musgrave Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 4	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	15000.00
<b>TOTAL</b> 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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
House Conservatives Fund

Full Name (Last, First, Middle Initial) <b>A. Joe Negron for Congress</b>		<b>Transaction ID: D132-01Q701</b> Date of Disbursement 10 / 10 / 2006	
Mailing Address P. O. Box 1816		Amount of Each Disbursement this Period 5000.00	
City Stuart State FL Zip Code 34995	Purpose of Disbursement contribution-FL(16) Candidate Name Joe Negron Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 16	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Mike Sodrell for Congress</b>		<b>Transaction ID: D168-011L01</b> Date of Disbursement 10 / 13 / 2006	
Mailing Address 702 North Shore Drive, #500		Amount of Each Disbursement this Period 5000.00	
City Jeffersonville State IN Zip Code 47130	Purpose of Disbursement contribution-IN(06) Candidate Name Michael E. Sodrel Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 6	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. Chris Wakim for Congress</b>		<b>Transaction ID: D209-01Q901</b> Date of Disbursement 10 / 10 / 2006	
Mailing Address P. O. Box 2176		Amount of Each Disbursement this Period 5000.00	
City Wheeling State WV Zip Code 26003	Purpose of Disbursement contribution-WV(01) Candidate Name Chris Wakim Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 1	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	15000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	45000.00

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
House Conservatives Fund

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Tri-State Envleope Corporation	Nature of Debt (Purpose): direct mail services
Mailing Address P. O. Box 433	
City State ZIP Code Beltsville MD 20704	

Outstanding Balance Beginning This Period <input type="text" value="3543.75"/>	<b>Transaction ID: 10</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="3543.75"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor The Richard Norman Company	Nature of Debt (Purpose): direct mail services
Mailing Address 44084 Riverside Pkwy., #350	
City State ZIP Code Lansdowne VA 20176	

Outstanding Balance Beginning This Period <input type="text" value="4260.00"/>	<b>Transaction ID: 11</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="4260.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Robertson Mailing List Company	Nature of Debt (Purpose): direct mail services
Mailing Address 44084 Riverside Pkwy., #350	
City State ZIP Code Lansdowne VA 20176	

Outstanding Balance Beginning This Period <input type="text" value="3395.00"/>	<b>Transaction ID: 12</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="3395.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="0.00"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
House Conservatives Fund

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Printing Express	Nature of Debt (Purpose): printing
Mailing Address 1832 S. Main Street	
City State ZIP Code Harrisonburg VA 22801	

Outstanding Balance Beginning This Period 1160.84	<b>Transaction ID: 34</b>	
Amount Incurred This Period 0.00	Payment This Period 1160.84	Outstanding Balance at Close of This Period 0.00

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor J & N Printing	Nature of Debt (Purpose): printing
Mailing Address 5495 Glenthorne Court	
City State ZIP Code White Marsh MD 21237	

Outstanding Balance Beginning This Period 3236.50	<b>Transaction ID: 35</b>	
Amount Incurred This Period 0.00	Payment This Period 3236.50	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional).....	0.00
2) <b>TOTALS</b> This Period (last page this line number only).....	0.00
3) <b>TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	

Image# 26960630371

Form/Schedule: **F3XN**

Transaction ID:

No expenditure, other than a direct contribution, was made on behalf of a specifically identified federal candidate. No expenditure was for a public communication that referred to a clearly identified candidate for Federal office and that promoted, supported, attacked or opposed any such candidate for Federal office.

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