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FEC FORM 3X

Only

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REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED FEC MAIL CENTER

2010 JUL 20 AM 9: 17

Office Use Only TYPE OR PRINT ▼ NAME OF Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. ICIONS ERVATILIVE NATIONALL COMMUTITIES ADDRESS (number and street) Check if different than previously ARLUNGTON 12,2,2,1 reported. (ACC) CITY A STATE A ZIP CODE FEC IDENTIFICATION NUMBER ▼ NEW **AMENDED** 3. IS THIS 39097 OR REPORT (N) (A) TYPE OF REPORT (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Electic Year Only) Report (Choose One) Due On: Dec 20 (M12) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (Non-Election Year Only) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report (Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 **PRE-Election** Quarterly Report (Q2) Report for the: Convention (12C) Special (12S) October 15 Quarterly Report (Q3) in the January 31 Election on State of Year-End Report (YE) July 31 Mid-Year (d) 30-Qay Report (Non-election **POST-**Election General (30G) Runoff (30R) Special (30S) Year Only) (MY) Report for the: Termination Report (TER) in the Election on State of 66 00 200 **Covering Period** through 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 Date Signature of Treasurer 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 **FEC FORM 3X** Use Rev. 12/2004

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SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name COMMITTEE NATIONAL CONSERVATIVE To: From: Report Covering the Period: **COLUMN B COLUMN A** This Period Calendar Year-to-Date (a) Cash on Hand January 1, (b) Cash on Hand at Beginning of Reporting Period..... (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) 7. Total Disbursements (from Line 31).......... Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: **Federal Election Commission** 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name CONSERVATIVE NATIONAL COMMITTEE From: To: Report Covering the Period: **COLUMN B COLUMN A** 1. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)..... (ii) Uniternized (iii) TOTAL (add Lines 11(a)(i) and (ii).....▶ (b) Political Party Committees (c) Other Political Committees (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)▶ 12. Transfers From Affiliated/Other Party Committees..... 13. All Loans Received 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... 17. Other Federal Receipts (Dividends, Interest, etc.)..... 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3)..... (b) Levin Funds (from Schedule H5) (c) Total Transfers (add 18(a) and 18(b))... 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))......... 20. Total Federal Receipts (subtract Line 18(c) from Line 19)▶ 5.00

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DETAILED SUMMARY PAGE

of Disbursements

Page 4

FEC Form 3X (Rev. 02/2003)

COLUMN A COLUMN B II. Disbursements **Total This Period** Calendar Year-to-Date 21. Operating Expenditures: Allocated Federal/Non-Federal Activity (from Schedule H4) Federal Share (ii) Non-Federal Share..... (b) Other Federal Operating Expenditures (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶ 22. Transfers to Affiliated/Other Party Committees..... Contributions to Federal Candidates/Committees and Other Political Committees..... 24. Independent Expenditures 26. Loan Repayments Made..... 27. Loans Made......28. Refunds of Contributions To: 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)).......... ▶ 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))....▶ 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 5 COLUMN A III. Net Contributions/Operating Ex-COLUMN B **Total This Period** Calendar Year-to-Date penditures 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)

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SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: **PAGE** OF Use separate schedule(s) (check only one) ITEMIZED RECEIPTS for each category of the **1**11a 115 110 12 **Detailed Summary Page** 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) COMMITTEE NATIONAL DIUSERVATIVE Full Name (Last, First, Middle Initial) 5 HAWW STEEL Date of Receipt Mailing Address + AWTHORNE City Zio Code 96274 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Occupation Name of Employer SELE ATTORNE Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name (Last, First, Middle Initial) B. Date of Receipt Mailing Address CREEK BLUD City Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Occupation Name of Employer RETIRED Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name (Last, First, Middle Initial) C. Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
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	Detailed Summary Page	27	28a 28b 28c 29 30b
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NAME OF COMMITTEE (In Full)	o and address of any pointer t	John Michael Co	CONTRACTOR TOTAL SUCTI CONTINUES.
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Full Name (Last, First, Middle Initial)	70.11.010.1.0		
A. RALPH GALLIANO		1	Date of Disbursement
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ARLINGTON	A 22210		
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	Other (specify) ▼		
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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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ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any information copied from such Reports and States or for commercial purposes, other than using the name	nents may not be sold or us ne and address of any politic	sed by any perso	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (in Full)	NATIONAL C		
Full Name (Last, First, Middle Initial) A. FRIENDS OF SHARROW Mailing Address 2595 S. CIMARROW	ANGLE		Date of Disbursement
City Purpose of Disbursement SHARRON ANGLE Candidate Name POLITICAL CONTRO Office Sought: House Disburser Senate President State: NV District:	State Zip Code NV 89/17 BUTION		Amount of Each Disbursement this Period
Full Name (Last, First, Middle Initial) B. CHUCK DEVORE FOR Mailing Address 4790 IRVINE BLVD			Date of Disbursement
Purpose of Disbursement POLITICAL CONTRO Candidate Name CHUCK DE VORE Office Sought: House Disburser	State Zip Code 7 2 6 20	Category/ Type	Amount of Each Disbursement this Period
C. Full Name (Last, First, Middle Initial) Mailing Address KELLY MILLE	EORD CONGRES	ss	Date of Disbursement
City CUMMING Purpose of Disbursement Candidate Name Office Sought: House Disburser	State Zip Code A 20640 LBUTOW	Category/ Type	Amount of Each Disbursement this Period
SUBTOTAL of Disbursements This Page (optional)			
TOTAL This Period (last page this line number only)			1250 -

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SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

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

FOR LINE NUMBER:
(check only one)

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IAME OF COMMITTEE (In Full)		
Conservative National Comm	Hee	
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpos	
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Mailing Address 1430 Springlill Road #490		
City State VA ZIP Code XX ZIP Code		
Outstanding Balance Beginning This Period		
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Amount Incurred This Period Payment This Period	Onerguous parance	at Close of This Period
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B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpor	
Bruce W. Eberle & Associates	<i>fundrais</i>	ing
Mailing Address 1430 Springhill Road # 490		
City Mc Lean, VA Zip Code		
Outstanding Balance Beginning This Period		
179740		
Amount Incurred This Period Payment This Period	Outstanding Balance	at Close of This Period
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C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpos	se):
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Mailing Address 83.30 Old Courthouse Road		
City Vienna VA 22180		
Outstanding Balance Beginning This Period		
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SCHEDULE D (FEC Form 3X)

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DEBTS AND OBLIGATIONS	schedule(s) FOR LINE NUMBER: (check only one) 9 numbered line)
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Consorrative National Committ	· ૯૯
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
CCI	Computer Printing
Mailing Address 30 Old Courthouse Road	
City State VA ZIP Code 22180	
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B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
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Mailing Address Matrilee Drive	
City State Zip Code	
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City Fairfax State Zip Code 2203/	
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PAGE 3 OF

DEBTS AND OBLIGATIONS	for each	(check only one) 9
Excluding Loans	numbered line)	1/10
NAME OF COMMITTEE (In Full)		
Conservative National Committee		
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor ANDTEWS REPRODUCTION CENTER		ebt (Purpose):
Mailing Address 10101-J Becon Drive		
City Bellsville MD Zip Code 20705		
Outstanding Balance Beginning This Period		
Amount Incurred This Period Payment This Period	Outstandi	ng Balance at Close of This Period
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B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of D	lebt (Purpose):
Canter, Kont & Sullivan	Le	gal Services
Mailing Address Street, N.W.		
City State DC Zip Code 2006		
Outstanding Balance Beginning This Period		
2825988		
Amount Incurred This Period Payment This Period	Outstandi	ng Balance at Close of This Period
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C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		ebt (Purpose):
Southeest Printing	PRIN	TING SERVICES
Mailing Address 2401 Wilson Blud.		
City Arlington VA State Zip Code 23201		
Outstanding Balance Beginning This Period		
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SCHEDULE D (FEC Form 3X) **DEBTS AND OBLIGATIONS**

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Excluding Loans	numbered line)	<u> </u>
NAME OF COMMITTEE (In Full)		
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A. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (I	· · · · · ·
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FALLS CAURCH VA 22041		
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Mailing Address		
City LYDELL ROAD State Zip Code		
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SCHEDULE D (FEC Form 3X)	ļ		(Use separate	PAGE 5 OF 5
DEBTS AND OBLIGATIONS Excluding Loans			schedule(s) for each numbered line)	FOR LINE NUMBER: (check only one)
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CONSERVATI	UE NATIONA	L COMMIT	MEE	
A. Full Name (Last, First, Middle Initial) of Del			Nature of D	ebt (Purpose):
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Maliting Address 1730 M ST				
City State WASHINGTON	7in Chila	0036		
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B. Full Name (Last, First, Middle Initial) of Debt	or or Creditor		Nature of D	ebt (Purpose):
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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING The FEC added this page to the end of this filing to indicate	
	Date of Receipt
Hand Delivered	7/20/10
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USPS Registered/Certified	Postmarked (R/C)
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Other (Specify):	Receipt or Postmarked
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PREPARER	DATE PREPARED
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