

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED FEC MAIL CENTER 2008 APR 23 AM 11:08 Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT

Example: If typing, type over the lines.

12FE4M5

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

000139097

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

(b) Monthly Report Due On:

- Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), Jan 31 (YE)

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

- Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S)

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

03 ' 01 ' 2008

through

03 ' 31 ' 2008

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

Type or Print Name of Treasurer RALPH J. GALLIANO

Signature of Treasurer

Ralph J. Galliano

Date

04 ' 18 ' 2008

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

Office Use Only

FEC FORM 3X Rev. 12/2004

28039710481

**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** / **2008**

To:

03 / **31** / **2008**

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2008		76,304
(b) Cash on Hand at Beginning of Reporting Period.....	201,535	
(c) Total Receipts (from Line 19)	2,000-	7,500-
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	401,535	826,304
7. Total Disbursements (from Line 31).....	2,458-	670,569
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	155,735	155,735
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	949,308.22	



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

28039710482

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

CONSERVATIVE NATIONAL COMMITTEE

Report Covering the Period: From: **03** / **01** / **2008** To: **03** / **31** / **2008**

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

2000-

0

2000-

7500-

0

7500-

- (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).....▶

2000-

7500-

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)).....▶

2000-

7500-

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

2000-

7500-

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DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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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	608-	3,855.69
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	608-	3,855.69
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		
UNCASHED CHECK	2,850-	2,850-
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)).....		
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))..	2,458-	6,705.69
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2,458-	6,705.69

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	2,000 -	7,500 -
34. Total Contribution Refunds (from Line 28(d))	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2,000 -	7,500 -
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	608 -	3,8556.9
37. Offsets to Operating Expenditures (from Line 15, page 3)	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36)	608 -	3,8556.9

28039710485

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE	OF
	<input checked="" type="checkbox"/> 11a	<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)
CONSERVATIVE NATIONAL COMMITTEE

Full Name (Last, First, Middle Initial)
A. MICHAEL Der Manouel

Mailing Address
2536 West B Rockwood Ave

City **Fresno** State **CA** Zip Code **97311**

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

Name of Employer **Der Manouel Insurance Group** Occupation **INSURANCE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
03 / 31 / 2008

Amount of Each Receipt this Period
2,000 -

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶ **2,000 -**

28039710486

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

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NAME OF COMMITTEE (In Full)
CONSERVATIVE NATIONAL COMMITTEE

A. **USPS**

Mailing Address: **PO Box 101326**

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

Purpose of Disbursement: **ADMINISTRATIVE EXPENSE** Category/Type: **001**

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: **03' 10' 2008**

Amount of Each Disbursement this Period: **108 -**

B. **JOHN GIZZI**

Mailing Address: **PO BOX 101326**

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

Purpose of Disbursement: **ADMINISTRATIVE EXPENSE** Category/Type: **001**

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: **03' 31' 2008**

Amount of Each Disbursement this Period: **250 -**

C. **RALPH GALLIANO**

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

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

Purpose of Disbursement: **ADMINISTRATIVE EXPENSE** Category/Type: **001**

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: **03' 31' 2008**

Amount of Each Disbursement this Period: **250 -**

SUBTOTAL of Disbursements This Page (optional) ▶

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

608 -

28039710487

**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 1 OF 2
	<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)
CONSERVATIVE NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
OBERWEIS for CONGRESS

Date of Disbursement
03 ' 05 ' 2008

Mailing Address
335 NORTH RIVER STREET, SUITE 203

City
BATAVIA State **IL** Zip Code **60510**

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name
JIM OBERWEIS

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **SPECIAL**

State: **IL** District: **14**

Amount of Each Disbursement this Period
200-

Category/Type
011

B.

Full Name (Last, First, Middle Initial)
WOODY JENKINS for CONGRESS

Date of Disbursement
03 ' 07 ' 2008

Mailing Address
888 TARA BLVD SUITE H

City
BATON ROUGE State **LA** Zip Code **70806**

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name
WOODY JENKINS

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **SPECIAL**

State: **LA** District: **6**

Amount of Each Disbursement this Period
500-

Category/Type
011

C.

Full Name (Last, First, Middle Initial)
SCAUSE for CONGRESS

Date of Disbursement
03 ' 07 ' 2008

Mailing Address
3100 RIDGELAKE SUITE 309

City
METairie State **LA** Zip Code **70002**

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name
STEVE SCAUSE

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **SPECIAL**

State: **LA** District: **1**

Amount of Each Disbursement this Period
250-

Category/Type
011

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

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

28039710488

**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

PAGE 2 OF 2

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

NAME OF COMMITTEE (In Full)
CONSERVATIVE NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
McCLINTOCK FOR CONGRESS

Mailing Address

City State Zip Code

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name
TOM McCLINTOCK

Office Sought: House Senate President
State: **CA** District: **4**

Disbursement For: Primary General
 Other (specify) ▼

Date of Disbursement
03 / 17 / 2008

Amount of Each Disbursement this Period
1000-

Category/Type
011

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

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
State: District:

Disbursement For: Primary General
 Other (specify) ▼

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).....▶

1950-

28039710489

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 1 OF 5
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Conservative National Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Omega List Company	Nature of Debt (Purpose): List Rental
Mailing Address 1430 Springhill Road #490	
City State Zip Code McLean VA 22102	

Outstanding Balance Beginning This Period 19,269.39	Amount Incurred This Period 0	Payment This Period 0	Outstanding Balance at Close of This Period 19,269.39
---	---	---------------------------------	---

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

Outstanding Balance Beginning This Period 17,974.00	Amount Incurred This Period 0	Payment This Period 0	Outstanding Balance at Close of This Period 17,974.00
---	---	---------------------------------	---

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor GRAPHICS	Nature of Debt (Purpose): Graphics
Mailing Address 8330 Old Courthouse Road	
City State Zip Code Vienna VA 22180	

Outstanding Balance Beginning This Period 39,156	Amount Incurred This Period 0	Payment This Period 0	Outstanding Balance at Close of This Period 39,156
--	---	---------------------------------	--

1) SUBTOTALS This Period This Page (optional)	21,458.35
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) ▶	

28039710490

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Conservative National Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor CCI	Nature of Debt (Purpose): Computer Printing
Mailing Address 8330 Old Courthouse Road	
City State Zip Code Vienna VA 22180	

Outstanding Balance Beginning This Period 153877	Amount Incurred This Period 0	Payment This Period 0	Outstanding Balance at Close of This Period 153877
--	---	---------------------------------	--

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor WIB	Nature of Debt (Purpose): Mailing Services
Mailing Address 2727 Merrilee Drive	
City State Zip Code Fairfax VA 22031	

Outstanding Balance Beginning This Period 1122710	Amount Incurred This Period 0	Payment This Period 0	Outstanding Balance at Close of This Period 1122710
---	---	---------------------------------	---

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor ARCO Systems	Nature of Debt (Purpose): Computer Printing
Mailing Address 2853 Nutley Street	
City State Zip Code Fairfax VA 22031	

Outstanding Balance Beginning This Period 1165163	Amount Incurred This Period 0	Payment This Period 0	Outstanding Balance at Close of This Period 1165163
---	---	---------------------------------	---

1) SUBTOTALS This Period This Page (optional)	2441750
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) ▶	

28039710491

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Conservative National Committee

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

Nature of Debt (Purpose):
PRINTING

Mailing Address
10101-J Bacon Drive

City State Zip Code
Beltsville 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

Center, Kent & Sullivan

Nature of Debt (Purpose):
Legal Services

Mailing Address
2020 K Street, N.W.

City State Zip Code
Washington DC 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 SERVICES

Mailing Address
2401 Wilson Blvd.

City State Zip Code
Arlington VA 22201

Outstanding Balance Beginning This Period

39906

Amount Incurred This Period

0

Payment This Period

0

Outstanding Balance at Close of This Period

39906

1) SUBTOTALS This Period This Page (optional) ▶

3475614

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) ▶

28039710492

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

CONSERVATIVE NATIONAL COMMITTEE

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

Mailing Address
4333 DAVENPORT ROAD

City State Zip Code
FREDERICKSBURG VA 22401

Nature of Debt (Purpose):
MAILING SERVICES

Outstanding Balance Beginning This Period 44,316	Payment This Period 0	Outstanding Balance at Close of This Period 44,316
Amount Incurred This Period 0		

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
SIR SPEEDY PRINTING CENTERS

Mailing Address
5881 LEESBURG PIKE

City State Zip Code
FALLS CHURCH VA 22041

Nature of Debt (Purpose):
PRINTING

Outstanding Balance Beginning This Period 8,752.2	Payment This Period 0	Outstanding Balance at Close of This Period 8,752.2
Amount Incurred This Period 0		

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

Mailing Address
4701 LYDELL ROAD

City State Zip Code
CHEVERLY MD 20781

Nature of Debt (Purpose):
COMPUTER SERVICES

Outstanding Balance Beginning This Period 9,788.2	Payment This Period 0	Outstanding Balance at Close of This Period 9,788.2
Amount Incurred This Period 0		

1) SUBTOTALS This Period This Page (optional)..... ▶	229,720
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) ▶	

28039710493

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

CONSERVATIVE NATIONAL COMMITTEE

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

JAMES K. JEANBLANC

Nature of Debt (Purpose):

LEGAL SERVICES

Mailing Address

1730 M ST NW

City

State

Zip Code

WASHINGTON DC 20036

Outstanding Balance Beginning This Period

12001.63

Amount Incurred This Period

0

Payment This Period

0

Outstanding Balance at Close of This Period

12001.63

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

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

12001.63

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) ▶

94930.82

28039710494

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)
4/19/08

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

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date
 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

4/23/08
 DATE PREPARED

28039710495