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**FEC  
FORM 3X**

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

Office Use Only

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

Conservative Victory Committee

ADDRESS (number and street)

325 South Patrick Street

Check if different than previously reported. (ACC)

Alexandria VA 22314

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C00218172

3. IS THIS REPORT NEW OR AMENDED  
 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)

May 20 (M5)

Aug 20 (M8)

Nov 20 (M11) (Non-Election Year Only)

Mar 20 (M3)

Jun 20 (M6)

Sep 20 (M9)

Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4)

Jul 20 (M7)

Oct 20 (M10)

Jan 31 (YE)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

MM / DD / YYYY

in the State of

(d) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

MM / DD / YYYY

in the State of

5. Covering Period 07 ' 01 ' 2009 through 12 ' 31 ' 2009

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

Type or Print Name of Treasurer Leif E Noren

Signature of Treasurer

Date

03 ' 30 ' 2010

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

Office Use Only

FEC FORM 3X  
Rev. 12/2004

10030274544

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Conservative Victory Committee

Report Covering the Period: From: 07 ' 01 ' 2009 To: 12 ' 31 ' 2009

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <u>2009</u>		, 1,139.81
(b) Cash on Hand at Beginning of Reporting Period.....	, 1,080.08	
(c) Total Receipts (from Line 19) .....	, , .27	, , .70
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	, 1,080.35	, 1,140.51
7. Total Disbursements (from Line 31).....	, , 735.16	, , 795.32
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	, , 345.19	, , 345.19
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) .....	, 1,391.37	

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

10030274545

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Conservative Victory Committee

Report Covering the Period: From: 07' 01' 2009 To: 12' 31' 2009

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)).....▶	,	,
(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).....▶	,	,

10030274546

.27

.70

.27

.70

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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 .....	, 635.16	, 695.32
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	,	,
22. Transfers to Affiliated/Other Party Committees.....	,	,
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	, 100.00	, 100.00
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))..	, 735.16	, 795.32
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	,	,

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**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) .....	,	,
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)) .....	, 635.16	, 695.32
37. Offsets to Operating Expenditures (from Line 15, page 3).....	,	,
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	, 635.16	, 695.32

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**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 1 OF 2

<input 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 checked="" 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 Victory Committee**

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

Mailing Address **1717 King Street**

City **Alexandria** State **VA** Zip Code **22314**

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: Primary  General  Other (specify)  **Interest**

Aggregate Year-to-Date ▼ \_\_\_\_\_

Date of Receipt **07/31/2009**

Amount of Each Receipt this Period **.05**

**B.** Full Name (Last, First, Middle Initial) **BB & T Bank**

Mailing Address **1717 King Street**

City **Alexandria** State **VA** Zip Code **22314**

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: Primary  General  Other (specify)  **Interest**

Aggregate Year-to-Date ▼ \_\_\_\_\_

Date of Receipt **08/31/2009**

Amount of Each Receipt this Period **.05**

**C.** Full Name (Last, First, Middle Initial) **BB & T Bank**

Mailing Address **1717 King Street**

City **Alexandria** State **VA** Zip Code **22314**

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: Primary  General  Other (specify)  **Interest**

Aggregate Year-to-Date ▼ \_\_\_\_\_

Date of Receipt **09/30/2009**

Amount of Each Receipt this Period **.04**

SUBTOTAL of Receipts This Page (optional)..... **.14**

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

10030274549

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

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

FOR LINE NUMBER: PAGE **2** OF **2**

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

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

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

Mailing Address **1717 King Street**

City **Alexandria** State **VA** Zip Code **22314**

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) **Interest**

Aggregate Year-to-Date ▼

Date of Receipt **10/30/2009**

Amount of Each Receipt this Period **.05**

**B.** Full Name (Last, First, Middle Initial) **BB & T Bank**

Mailing Address **1717 King Street**

City **Alexandria** State **VA** Zip Code **22314**

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) **Interest**

Aggregate Year-to-Date ▼

Date of Receipt **11/30/2009**

Amount of Each Receipt this Period **.04**

**C.** Full Name (Last, First, Middle Initial) **BB & T Bank**

Mailing Address **1717 King Street**

City **Alexandria** State **VA** Zip Code **22314**

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) **Interest**

Aggregate Year-to-Date ▼

Date of Receipt **12/31/2009**

Amount of Each Receipt this Period **.04**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **.13**

**TOTAL** This Period (last page this line number only)..... ▶ **.27**

10030274550

**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 3

<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)

Conservative Victory Committee

Full Name (Last, First, Middle Initial)

A. BB & T Bank		Date of Disbursement
Mailing Address 1717 King Street		09/21/2009
City Alexandria VA	Zip Code 22314	Amount of Each Disbursement this Period 10.00
Purpose of Disbursement Candidate Name service charge		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State: District:		

B. BB & T Bank		Date of Disbursement
Mailing Address 1717 King Street		08/21/2009
City Alexandria VA	Zip Code 22314	Amount of Each Disbursement this Period 10.00
Purpose of Disbursement Candidate Name service charge		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State: District:		

C. BB & T Bank		Date of Disbursement
Mailing Address 1717 King Street		09/21/2009
City Alexandria VA	Zip Code 22314	Amount of Each Disbursement this Period 10.00
Purpose of Disbursement Candidate Name service charge		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

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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)						PAGE <b>2</b> OF <b>3</b>
	<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)  
**Conservative Victory Committee**

A. **BBIT Bank** Date of Disbursement: **10/21/2009**

Mailing Address: **1717 King Street**

City: **Alexandria** State: **VA** Zip Code: **22314**

Purpose of Disbursement: **service charge**

Candidate Name: \_\_\_\_\_ Amount of Each Disbursement this Period: **10.00**

Category/Type: \_\_\_\_\_

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

B. **BBIT Bank** Date of Disbursement: **11/23/2009**

Mailing Address: **1717 King Street**

City: **Alexandria** State: **VA** Zip Code: **22314**

Purpose of Disbursement: **service charge**

Candidate Name: \_\_\_\_\_ Amount of Each Disbursement this Period: **10.00**

Category/Type: \_\_\_\_\_

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

C. **Treasurer of VA** Date of Disbursement: **10/28/2009**

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Purpose of Disbursement: **fee for annual report**

Candidate Name: \_\_\_\_\_ Amount of Each Disbursement this Period: **25.00**

Category/Type: \_\_\_\_\_

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

**SUBTOTAL** of Disbursements This Page (optional).....▶ **45.00**

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

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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)						PAGE <b>3</b> OF <b>3</b>
	<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)  
**Conservative Victory Committee**

**A.** Full Name (Last, First, Middle Initial) **BBIT Bank**

Mailing Address **1717 King Street**

City **Alexandria** State **VA** Zip Code **22314**

Purpose of Disbursement **service charge**

Candidate Name \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement **12/21/2009**

Amount of Each Disbursement this Period **10.16**

Category/Type \_\_\_\_\_

**B.** Full Name (Last, First, Middle Initial) **Conservative Victory Committee-SEF**

Mailing Address **325 S. Patrick Street**

City **Alexandria** State **VA** Zip Code **22314**

Purpose of Disbursement **transfer**

Candidate Name \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement **12/01/2009**

Amount of Each Disbursement this Period **300.00**

Category/Type \_\_\_\_\_

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

Mailing Address **6862 Elm Street #360**

City **McLean** State **VA** Zip Code **22101**

Purpose of Disbursement **Legal fees**

Candidate Name \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement **12/1/2009**

Amount of Each Disbursement this Period **250.00**

Category/Type \_\_\_\_\_

**SUBTOTAL** of Disbursements This Page (optional).....▶ **560.16**

**TOTAL** This Period (last page this line number only).....▶ **635.16**

10030274553

**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 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 Victory Committee**

A. Full Name (Last, First, Middle Initial) <b>MARCO RUBIO FOR US SENATE</b>		Date of Disbursement <b>12 / 22 / 2009</b>
Mailing Address <b>2030 South Douglas Road #105</b>		Amount of Each Disbursement this Period  <b>, 100.00</b>
City <b>Coral Gables</b>	State <b>FL</b>	
Zip Code <b>33134</b>		
Purpose of Disbursement <b>Contribution</b>		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

B. Full Name (Last, First, Middle Initial)		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code		
Purpose of Disbursement		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

C. Full Name (Last, First, Middle Initial)		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code		
Purpose of Disbursement		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	, , ,
<b>TOTAL</b> This Period (last page this line number only).....▶	, , <b>100.00</b>

10030274554

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

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

PAGE / OF /  
 FOR LINE NUMBER:  
 (check only one)  9  10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <i>Satuen Corp.</i>		Nature of Debt (Purpose): <i>Computer Services</i>
Mailing Address <i>4701 Lydell Road</i>		
City <i>Cheverly</i>	State <i>MD</i>	
Zip Code <i>20781</i>		
Outstanding Balance Beginning This Period <i>1,169.07</i>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period <i>1,169.07</i>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <i>Washington Intelligence Bureau</i>		Nature of Debt (Purpose):
Mailing Address <i>2727 Menlee Drive</i>		
City <i>Fairfax</i>	State <i>VA</i>	
Zip Code <i>22031</i>		
Outstanding Balance Beginning This Period <i>222.30</i>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period <i>222.30</i>

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).....▶	<i>1,391.37</i>
2) TOTALS This Period (last page this line number only).....▶	<i>1,391.37</i>
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)▶	<i>1,391.37</i>

10030274555

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  
*3/30/10*  
 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

*3/31/10*  
 DATE PREPARED

10030274556