

FEC
FORM 3X

REPORT OF RECEIPTS
AND DISBURSEMENTS
For Other Than An Authorized Committee

RECEIVED
FEC MAIL CENTER
2008 JAN 29 AM 9:20
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)

P.O. Box 101326



Check if different than previously reported. (ACC)

ARLINGTON

VA

22210-

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

C00139097

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

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

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

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

Election on [] / [] / [] in the State of []

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

Election on [] / [] / [] in the State of []

5. Covering Period 12 / 01 / 2007 through 12 / 31 / 2007

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. GALLIAND

Signature of Treasurer

Ralph J. Galliand

Date

01 / 29 / 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							
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FEC FORM 3X
Rev. 12/2004

**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: 12 01 2007 To: 12 31 2007

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <u>2007</u>		<u>7559</u>
(b) Cash on Hand at Beginning of Reporting Period.....	<u>201304</u>	
(c) Total Receipts (from Line 19)	<u>50000</u>	<u>12750-</u>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<u>251304</u>	<u>1282559</u>
7. Total Disbursements (from Line 31)	<u>1750-</u>	<u>1206255</u>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<u>76304</u>	<u>76304</u>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<u>0</u>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<u>9493082</u>	



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

280396035A7

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:

12 / 01 / 2007

To:

12 / 31 / 2007

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).....

500 -

1,375.00 -

(ii) Unitemized

0

0

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

500 -

1,275.00 -

(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)

500 -

1,275.00 -

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))..... ▶

500 -

1,275.00 -

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)..... ▶

500 -

1,275.00 -

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

(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

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)) ..

32. Total Federal Disbursements
(subtract Line 21(a)(ii) and Line 30(a)(ii)
from Line 31)

750-

750-

1000-

1750-

1750-

1066255

1066255

1400-

1206255

1206255

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Ex-
penditures

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

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

500 -
0
500 -
750 -
0
750 -

12750 -
0
12750 -
1066255
0
1066255

28039603550

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 1

☒ 11a ☐ 11b ☐ 11c ☐ 12
13 14 15 16 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. SHAWN STEEL

Mailing Address

27520 HAWTHORNE BLVD

City

PALOS VERDE

State

CA

Zip Code

90274

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

LAWYER

Receipt For:

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500 -

Date of Receipt

12 / 04 / 2007

Amount of Each Receipt this Period

500 -

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)

500 -

28039603551

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 1

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

CONSERVATIVE NATIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A.

JOHN GIZZI

Mailing Address

P.O. BOX 101326

City

ARLINGTON

State

VA

Zip Code

22210

Purpose of Disbursement

ADMINISTRATIVE EXPENSE

Candidate Name

001
Category/
Type

Date of Disbursement

12 / 03 / 2007

Amount of Each Disbursement this Period

250.-

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B.

RALPH GALLIANO

Mailing Address

P.O. BOX 101326

City

ARLINGTON

State

VA

Zip Code

22210

Purpose of Disbursement

ADMINISTRATIVE EXPENSE

Candidate Name

001
Category/
Type

Date of Disbursement

12 / 15 / 2007

Amount of Each Disbursement this Period

500.-

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

001
Category/
Type

Date of Disbursement

12 / 01 / 2007

Amount of Each Disbursement this Period

250.-

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

250.-

250.-

28039603552

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

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

CONSERVATIVE NATIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. **FRIENDS OF PETER KINDER**

Mailing Address

Date of Disbursement

12 / 12 / 2007

City State Zip Code

CAPE GIRARDEAU MO

Purpose of Disbursement

POLITICAL CONTRIBUTION

Candidate Name

PETER KINDER

011

Category/
Type

Amount of Each Disbursement this Period

1,000.-

Office Sought:

LT. GOV

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☒ General

☐ Other (specify) ▼

State: **MO**

District:

Full Name (Last, First, Middle Initial)

B.

Mailing Address

Date of Disbursement

MM / DD / YYYY

City State Zip Code

Purpose of Disbursement

Candidate Name

**Category/
Type**

Amount of Each Disbursement this Period

**Category/
Type**

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

MM / DD / YYYY

City State Zip Code

Purpose of Disbursement

Candidate Name

**Category/
Type**

Amount of Each Disbursement this Period

**Category/
Type**

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State:

District:

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

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

**Category/
Type**

**Category/
Type**

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)

9
10

NAME OF COMMITTEE (In Full)

Conservative National Committee

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

Omega Lst Company

Nature of Debt (Purpose):

List Rental

Mailing Address

1430 Springhill Road #490

City

State

McLean

VA

Zip Code

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

McLean

VA

Zip Code

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

Vienna

State

VA

Zip Code

22180

Outstanding Balance Beginning This Period

391.56

Amount Incurred This Period

0

Payment This Period

0

Outstanding Balance at Close of This Period

391.56

1) SUBTOTALS This Period This Page (optional) ▶

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

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

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

21,458.35

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

PAGE 2 OF 5

FOR LINE NUMBER:
(check only one)

9
10

NAME OF COMMITTEE (In Full)

Conservative National Committee

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

CCI

Nature of Debt (Purpose):

Computer Printing

Mailing Address

8330 Old Courthouse Road

City

Vienna

State

VA

Zip Code

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 Matilee Drive

City

Fairfax

State

VA

Zip Code

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

Fairfax

State

VA

Zip Code

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) ▶

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) ▶

2441750

28030603555

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

PAGE 3 OF 5

FOR LINE NUMBER:
(check only one)

9
10

NAME OF COMMITTEE (In Full)

Conservative National Committee

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

Nature of Debt (Purpose):

PRINTING

Mailing Address

10101-J Bacon Drive

City

Beltsville

State

MD

Zip Code

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

Washington

State

DC

Zip Code

20006

Outstanding Balance Beginning This Period

2825988

Amount Incurred This Period

0

Payment This Period

0

Outstanding Balance at Close of This Period

2825988

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

Southeast Printing

Nature of Debt (Purpose):

PRINTING SERVICES

Mailing Address

2401 Wilson Blvd.

City

Arlington

State

VA

Zip Code

22201

Outstanding Balance Beginning This Period

39906

Amount Incurred This Period

0

Payment This Period

0

Outstanding Balance at Close of This Period

39906

1) SUBTOTALS This Period This Page (optional)

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

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

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

3475614

28030603555

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

PAGE 4 OF 5

FOR LINE NUMBER:
(check only one)

9
10

NAME OF COMMITTEE (In Full)

CONSERVATIVE NATIONAL COMMITTEE

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

DIVERSIFIED MAILING SERVICES

Nature of Debt (Purpose):

MAILING SERVICES

Mailing Address

4333 DAVENPORT ROAD

City

State

Zip Code

FREDERICKSBURG VA 22401

Outstanding Balance Beginning This Period

44316

Amount Incurred This Period

0

Payment This Period

0

Outstanding Balance at Close of This Period

44316

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

SIR SPEEDY PRINTING CENTERS

Nature of Debt (Purpose):

PRINTING

Mailing Address

5881 LEESBURG PIKE

City

State

Zip Code

FALLS CHURCH VA 22041

Outstanding Balance Beginning This Period

87522

Amount Incurred This Period

0

Payment This Period

0

Outstanding Balance at Close of This Period

87522

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

SATURN CORPORATION

Nature of Debt (Purpose):

COMPUTER SERVICES

Mailing Address

4701 LYDELL ROAD

City

State

Zip Code

CHEVERLY MD 20781

Outstanding Balance Beginning This Period

97882

Amount Incurred This Period

0

Payment This Period

0

Outstanding Balance at Close of This Period

97882

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

229720

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) ►

28039603557

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

PAGE 5 OF 5

FOR LINE NUMBER:
(check only one)

☒ 9
☐ 10

NAME OF COMMITTEE (In Full)

CONSERVATIVE NATIONAL COMMITTEE

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

JAMES K. FERNBLANC

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) ▶

9493.082

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
1/29/08

☐ 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): 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
(3/2005)

1/29/08
DATE PREPARED

28039603559