2010 HAR 31 AM 11: 45

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

_									Thice use Only	
1.	NAME OF COMMITTEE (in full)	TYPE	OR PE	RINT ¥		ample: If typing or the lines.	g, type 1	2FE4M5		
	onservatin	<u>L.</u>	Vio	sta	Ry. C	mm	ittee	,	<u> </u>	
L			_!	<u> </u>	<u></u>	المالية	<u> </u>		<u> </u>	
ΑD	DRESS (number and street)	3	25	, 50	outh,	Patr	ick	Strec	<u></u>	
	Check if different than previously reported. (ACC)	L: A	المارا	/. <i>(</i>)	dRia			VAI 6	12314	
2.	FEC IDENTIFICATION N	VIL UMBE	-″U/	_	CITY ▲		S1	TATE A	ZIP CO	DDE A
	C002181	12			3. IS THIS REPORT		EW I) OR	AMEI (A)	NDED	
4.	TYPE OF REPORT (Choose One)	(b) Month Repo	rt	Feb 20 (M2)	М	ay 20 (M5)	Aug 20	(M8)	Nov 20 (M11) (Non-Election Year Only)
	(a) Quarterly Reports:		Due (Jn:	Mar 20 (M3)	Ju	ın 20 (M6)	Sep 20	(M9)	Dec 20 (M12) (Non-Election Year Only)
	April 15				Apr 20 (M4)	Ju	ıl 20 (M7)	Oct 20	(M10)	Jan 31 (YE)
	Quarterly Report (C July 15	21)		12-Day		Primary (12P)		General (12	:G)	Runoff (12R)
	Quarterly Report (C	2 2)		PRE-Elec Report fo		Convention (1	2C)	Special (12	S)	
	Quarterly Report (C	23)				M M /	D D / Y	Y Y Y	in the	
	January 31 Year-End Report (\	YE)			Election on				State	of
	July 31 Mid-Year Report (Non-electio Year Only) (MY)	nc	1	30-Day POST- Ele Report fo		General (30G))	Runoff (30F	1) .	Special (30S)
	Termination Report (TER)				Election on	м и /	D D / Y	Y Y Y	in the State	of
5.	Covering Period \mathcal{D}	7	Ol	Ź	ŏŏ9	through	06	'30'	2009)
l ce	ertify that I have examined th	nis Re	port an	d to the	best of my kno	wledge and be	elief it is true	, correct and c	omplete.	
Тур	oe or Print Name of Treasure	∍r'	Lei	C E	NoReal					
Sig	nature of Treasurer(A	37				Dat	te 0 3	30	7010
NO	TE: Submission of false, erron	eous,	r incor	nplete inf	ormation may su	ubject the perso	on signing this	Report to the	penalties of 2	U.S.C. §437g.
_	Office Use	/							FEC FOR	RM 3X
1	1000				1		1	l	Rev. 12/	2004

FE6AN026

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:

01 01 2009

то: 06 30 2009

	_	COLUMN A This Period	COLUMN B Calendar Year-to-Date			
6.	(a) Cash on Hand January 1, ŽÕṎ̈́		, 1,139.81			
	(b) Cash on Hand at Beginning of Reporting Period	, 1,139.81				
	(c) Total Receipts (from Line 19)	, , .43	, , .43			
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	, 1.14024	, 1,140.24			
7.	Total Disbursements (from Line 31)	, , 60.16	, , 60.16			
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	, 1,080.08	, 1,080.08			
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)	, 1,391.31				

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. 06/2004) Page 3

Write or Type Committee Name

Victory Committee

Report Covering the Period:

From:

01 01 2009

то: 06'30'2009

	I. Receipts		COLUMN		COLUMN B Calendar Year-to-Date		
11.	Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	,	7		_	_	
		,	7	·	,	,	•
	(ii) Unitemized(iii) TOTAL (add	,	7	•	7	,	•
	Lines 11(a)(i) and (ii)	1	,	•	,	1	•
	(b) Political Party Committees	,	7	-	,	1	-
	(such as PACs)(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry	, 1	,	-	,	,	•
12	Totals to Line 33, page 5) Transfers From Affiliated/Other	3	,	•	7	,	-
12.	Party Committees	,	,	•	,	,	•
13.	All Loans Received	,	,		3	,	
	Loan Repayments Received Offsets To Operating Expenditures (Refunds, Rebates, etc.)	,	,		,	7	-
16.	(Carry Totals to Line 37, page 5)	,	,	•	,	,	
	Political Committees	,	,		,	,	
17.	Other Federal Receipts			1/2			42
18.	(Dividends, Interest, etc.) Transfers from Non-Federal and Levin Funds (a) Non-Federal Account	3	,	170	,	,	,70
	(from Schedule H3)	,	,	•	,	7	-
	(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))▶	,	y	.43	,	,	.43
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	,	,	-	,	,	

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements		COLUMN A al This Per		COLUMN B Calendar Year-to-Date		
21. Operating Expenditures: (a) Allocated Federal/Non-Federal						
Activity (from Schedule H4)						
(i) Federal Share	,	y	-	,	,	
(ii) Non-Federal Share	,	,	•	,	, .	
(b) Other Federal Operating					1011	
Expenditures	,	, <i>U</i>	00.16	,	, 60.16	
(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)	,	,	•	,	, .	
	,	,		•	•	
6. Loan Repayments Made	,	,	•	,	,	
	,	•		,	,	
7. Loans Made	,	,		,	, .	
8. Refunds of Contributions To:	,	,		,	,	
(a) Individuals/Persons Other Than Political Committees			_			
-	,	,	•	,	, .	
(b) Political Party Committees						
(c) Other Political Committees	,	,	•	7	, .	
(such as PACs)						
(,	,	-	,	, .	
(d) Total Contribution Refunds						
(add Lines 28(a), (b), and (c))	•					
(442 2.1100 20(2)) (2), 4112 (2), 11111111	,	,	•	,	, .	
9. Other Disbursements						
	,	,	•	7	,	
0. Federal Election Activity (2 U.S.C. §431(2	20))					
(a) Allocated Federal Election Activity	,,					
(from Schedule H6)						
(i) Federal Share			_	_		
(7)	,	7	•	5	,	
(ii) "Levin" Share			_	_		
(b) Federal Election Activity Paid Entirely	,	,	-	7	,	
With Federal Funds						
(c) Total Federal Election Activity (add	1	,	•	,	, .	
Lines 30(a)(i), 30(a)(ii) and 30(b))						
Lines oo(a)(i), so(a)(ii) and so(b))	,	,	-	,	,	
1. Total Disbursements (add Lines 21(c), 22						
23, 24, 25, 26, 27, 28(d), 29 and 30(c))			/- A 1 /-		, 60.16	
20, 24, 20, 20, 21, 20(u), 23 and 30(c))	,	, U	00.16	,	, <i>\(\omega \om</i>	
2. 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

111.	Net Contributions/Operating Expenditures	· · · · · · · · · · · · · · · · · · ·			COLUMN B Calendar Year-to-Date		
33.	Total Contributions (other than loans)		*				
	(from Line 11(d), page 3)	,	7	•	,	,	•
34.	Total Contribution Refunds						
	(from Line 28(d))	,	,		,	,	-
35.	Net Contributions (other than loans)						
	(subtract Line 34 from Line 33)	7	3	•	,	,	•
36.	Total Federal Operating Expenditures			1.011.			1-01/a
	(add Line 21(a)(i) and Line 21(b)) ▶	1	,	60.16	3	3	60.16
37.	Offsets to Operating Expenditures						
	(from Line 15, page 3)	7	,	-	,	,	•
38.	Net Operating Expenditures			60.16			60.16
	(subtract Line 37 from Line 36)	,	,	$\omega \omega . \omega$,	,	$\varphi O.I \varphi$

SCHEDULE A (FEC Form 3X)

SCHEDOLE A (FEC POHII 3A)	Use separate schedule(s)	FOR LINE NUMBER: PAGE / OF 2
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Statements or for commercial purposes, other than using the name and		
NAME OF COMMITTEE (IN FUII) Conservative Victo		
Full Name (Last, First, Middle Initial) Mailing Address City A Ley and Last, First, Middle Initial) City A Ley and Last, First, Middle Initial) State FEC ID number of contributing federal political committee. Name of Employer Occupation	eet ^{Zip Code} 22314	Date of Receipt 01/30/2009 Amount of Each Receipt this Period .12
The Helest Full Name (Last, First, Middle Initial) Mailing Address Mailing Address The State of St	et	Date of Receipt "02/27/2009"
FEC ID number of contributing federal political committee. City Alexandra VA FEC ID number of contributing federal political committee. C Name of Employer Occupat	Zip Code 22314	Amount of Each Receipt this Period
Passin Fan	ite Year-to-Date ▼	<u> </u>
c. Full Name (Last, First, Middle Initial) Mailing Address Mailing Address Mill Name (Last, First, Middle Initial) Bank King Stree	.+	Date of Receipt 03/31/2009
FEC ID number of contributing federal political committee. Cocupation of Employer Cocupation of Empl	Zip Code 22314	Amount of Each Receipt this Period
Descript Form	ite Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)		.29
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE OF Use separate schedule(s) (check only one) for each category of the 11a 11b 11c 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) Full Name (Last, Date of Receipt Mailing Address City 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) Full Name (Last, Fi В. Date of Receipt Mailing Address City Amount of Each Receipt this Period FEC ID number of contributing .05 C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name (Last, Firs Middle Initial) Date of Receipt C. Mailing Address City 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).....

SCHEDULE B. (FEC Form 3X)

SCILDOLL D (I LO I OIII 5X)	Use separate schedule(s)	FOR LINE	
ITEMIZED DISBURSEMENTS	for each category of the	(check only	one) 22 23 24 25 26
	Detailed Summary Page	27	28a 28b 28c 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)	. ^		
	tory Comm	1: He	C
Full Name (Last, First, Middle Initial)			Date of Disbursement
BB9T Bank			
Mailing Address 1111 King	Street		01/23/2009
Alexandeia V	tate Zip Code 22314	<i>f</i>	
Purpose of Disbursement SERVICE Char			Amount of Each Disbursement this Period
Candidate Name	T	Category/	10.16
Office Sought: House Disburser		Туре	10.10
	ent For: Primary General		
	Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			
B. BBOT Bank			Date of Disbursement
Mailing Address			02/23/2009
I'III KING STY	tata Zin Cada /		, , , , , , , ,
City Alexandria V	Zip Code 22314		
Service Char	al.	Ì	Amount of Each Disbursement this Period
Candidate Name	7	Category/ Type	10.00
Office Sought: House Disbursem			
and the same of	Primary General Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial) C.		,	Date of Disbursement
BB 9 1 Bank			1
	trect		03/23/2009
HIELANAHA I	tate Zip Code 22311-	<i>+</i>	
Purpose of Disbursement SURVICE Chara	1		Amount of Each Dishumoment this David
Candidate Name		Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disburser			·
'mmut	Primary : General Other (specify) ▼		
State: Ďistrict:	V F = 27. ▼		
SUBTOTAL of Disbursements This Page (optional)		······ Þ	30.16
TOTAL This Period (last page this line number only).		······	

SCHEDULE B. (FEC Form 3X)

Use separate schedule(s) to closed, conty one) Disbursement	SCHEDULE B (FEC FOIII 3A)	Non populate ashedulates	FOR LINE N	
Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliditing contributions or for commercial purposes, other than using the name and address of any political committee to solidit contributions from such committee. NAME OF COMMITTEE (In Full) NAME OF COMMITTEE (In Full) Purpose of Disbursement A. BB / T BANK Mailing Address 11 King Street City Alexandria Name Category Type Office Sought: House Disbursement For: Sanale Primary General District President Disbursement Disburseme	ITEMIZED DISBURSEMENTS	for each category of the		
Anount of Each Disbursement this Period Candidate Name Candidate Name City Alexandria Disbursement For: Senale Prisident City Alexandria Disbursement For: Candidate Name City Alexandria Disbursement For: Senale Prisident Category/ Type Category/ Type Disbursement this Period Disbursement		Detailed Summary Page	1 📖	
Conservative Victory Committee Full Name (Last, First, Middle Initial) A. BB; T BALL Mailing Address 111 King Street Cardidate Name Category Service Charge Category Type Office Sought: House Disbursement For: Senate Primary General Pupose of Disbursement Disbursement For: Senate Primary Category Disbursement Primary Category Disbursement Primary Category Disbursement Disbursement Primary Category Disbursement				
A BB T BALL Mailing Address 1111 King Street City Alexandria VA 22314 Purpose of Disbursement Office Sought: House Primary State 2 22314 Purpose of Disbursement City Alexandria President Other (specify) ▼ Category/ Type Category/ Type Category/ Type Category/ Type Date of Disbursement this Period 10, ND Date of Disbursement To: City Alexandria VA 22314 Purpose of Disbursement To: Candidate Name Disbursement For: Senate Primary General Disbursement For: Senate Primary General Disbursement To: City Alexandria VA 22314 Purpose of Disbursement Category/ Type Date of Disbursement this Period 10, ND Date of Disbursement this Period 10, ND Amount of Each Disbursement Category/ Type Date of Disbursement Category/ Type Category/ Type Category/ Type Category/ Type City Alexandria VA 22314 Purpose of Disbursement Category/ Type City Alexandria VA 22314 Purpose of Disbursement Category/ Type Disbursement For: Senate Primary General Primary General Primary General Primary General Primary General Disbursement For: Senate Primary General Disbursement For: Senate Primary General Disbursement For: Category/ Type Category/ Type Category/ Type Category/ Type Date of Disbursement this Period 10. NO Date of Disbursement Type Category/ Type Cat		, ,		
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Mailing Address 111	Full Name (Last, First, Middle Initial)	- J -		
City Alexandria Street Category Type Office Sought: House Senate Primary General State: District: Full Name (Last, First, Middle Initial) Office Sought: House Street City Alexandria Variety General State: District: Full Name (Last, First, Middle Initial) Date of Disbursement Office Sought: House Street Category Type Date of Disbursement Office Sought: House Street Category Type Date of Disbursement Office Sought: House Disbursement For: Senate Primary General Date of Disbursement this Period ID. (D) Date of Disbursement Office Sought: House Disbursement For: Senate Primary General President State: District: Full Name (Last, First, Middle Initial) C. By T Dark Mailing Address III King Street City Alexandria Variety General President State: Disbursement Category Type Date of Disbursement Ob /30 / 2009 Amount of Each Disbursement this Period Category Type Office Sought: House Disbursement For: Senate Primary General President Disbursement For: Senate Primary General President Other (specify) Variety Type	BB, T Bank			Many In the way
HEXAMARIA Purpose of Disbursement SCRVICE Charge Category/ Type Office Sought: House Primary General President State: District: Full Name (Last, First, Middle Initial) Senate Primary General	Mailing Address 1111 King St	reet		04/21/2009
SCRVICE CHARGE Candidate Name Category/ Type Office Sought: House Primary General Purpose of Disbursement For: Senate Primary General President State: District: Full Name (Last, First, Middle Initial) B. B. G. T. BALK Mailing Address Category/ Type Date of Disbursement Date of Disbursement OS /21/2009 Amount of Each Disbursement Category/ Type Date of Disbursement OS /21/2009 Amount of Each Disbursement OS /21/2009 Date of Disbursement OS /21/2009 Amount of Each Disbursement OS /21/2009 Date of Disbursement OS /21/2009 Date of Disbursement OS /21/2009 Date of Disbursement OS /21/2009 Amount of Each Disbursement this Period 10. 00 Date of Disbursement this Period Category/ Type Category/ Type City A levandia Sante Disbursement OW /30/2009 Amount of Each Disbursement OW /30/2009 Amount of Each Disbursement OW /30/2009 Amount of Each Disbursement this Period Category/ Type Category/ Type Office Sought: House Senate Purpose of Disbursement this Period Category/ Type Category/ Type Category/ Type Office Sought: House President Other (specify) ▼ Category/ Type Category/ Type Category/ Type Office Sought: House President Other (specify) ▼ Category/ Type	Alexandria V	tate Zip Code 22314		
Candidate Name Office Sought: House Senate Primary General Gity Alexandria Primary General Primary General Primary General Gity Alexandria Primary General Primary General Primary General Gity Alexandria Primary General Gity Alexandria Primary General Gity Alexandria Primary General G		ADAR		Amount of Each Disbursement this Period
Office Sought: House Senate Primary General General General Primary General Primary General Primary General General Primary G	Candidate Name			10.00
President Other (specify)				
State: District: Full Name (Last, First, Middle Initial) B. B. G. T. Bank Mailing Address City Alexandeia VA Zip Code Purpose of Disbursement Schvice Charge Candidate Name District: Category/ Type District: Category/ Type District: District: District: Date of Disbursement O5 /21/2009 Amount of Each Disbursement this Period 10.00 Amount of Each Disbursement this Period 10.00 Date of Disbursement this Period 10.00 Amount of Each Disbursement this Period 10.00 Amount of Each Disbursement this Period 10.00 Date of Disbursement this Period 10.00 Date of Disbursement this Period 10.00 Amount of Each Disbursement Category/ Type Category/ Type Category/ Type Other (specify) Date of Disbursement this Period 10.00 Amount of Each Disbursement this Period 10.00 The Category/ Type Office Sought: Date of Disbursement this Period 10.00 The Category/ Type Office Sought: District: Other (specify) Type Other (specify) Type Other (specify) Type				
B. BB 9 T BANK Mailing Address 117 King Street City Alexandria States Size Size Size Code 22314 Purpose of Disbursement Sckvice Charge Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) C. BB 9 T BANK Mailing Address 1111 King Street City Alexandria Size Zip Code 22314 Purpose of Disbursement Seave Size Size Size Size Size Size Size Siz				
Mailing Address Mailing Address 117 King Strect				Pot of Pith
Mailing Address 111	BB & T Bank	_		1 1
City A EXAMABLA VA 22314 Purpose of Disbursement SCR VICE Charge Candidate Name Category/ Type Office Sought: House Primary General President State: District: Full Name (Last, First, Middle Initial) C. Mailing Address 111 King Street City A Lexamala VA 21314 Purpose of Disbursement Salar State Charge Category/ Type Date of Disbursement Ob /30/2009 Amount of Each Disbursement this Period Date of Disbursement Category/ Type Office Sought: House Primary General President President Other (specify) ▼ Senate Primary General Primary General Other (specify) ▼ State: District:	Mailing Address	trect		05/21/2009
Schvice Charge Candidate Name Category/ Type Categ	city Alexandria s	tate, Zip Code Z231	4	
Candidate Name Category/ Type Category/ Type		arae		Amount of Each Disbursement this Period
Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) C. Bb + T bank Mailing Address 111 King Street City Aleyandria VA Zip Code Purpose of Disbursement Sekvick Chakar Candidate Name Office Sought: House Senate Primary General President Other (specify) ▼ State: District:				
State: District: Full Name (Last, First, Middle Initial) C. Bb + T bank Mailing Address 1111 King Street City Alexandria VA Zip Code Purpose of Disbursement Selvice Charge Candidate Name Office Sought: House Senate Primary General President Other (specify) State: District: Other (specify) Date of Disbursement 06/30/2009 Date of Disbursement Code Category/ Type Amount of Each Disbursement this Period 10.00				
State: District: Full Name (Last, First, Middle Initial) C. BB & T Bank Mailing Address 111 King Street City Alexandria VA Zip Code Purpose of Disbursement Service Charge Category/ Type Office Sought: House Senate Primary General President Other (specify) State: District:				
Date of Disbursement Mailing Address		outer (opeony)		
Mailing Address 111 King Street City Alexandria VA Z2314 Purpose of Disbursement Sekvice Charge Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) ▼ State: District:			-	
City A Levande Name Set Vict Charact Candidate Name Category/ Type	c. BB & T Bank			
Purpose of Disbursement Sekvice Charac Candidate Name Category/ Type Office Sought: House Senate Senate President President State: District: Primary General Other (specify)	Mailing Address 1111 King St	reet		06/30/2009
Sekvice Character Category/ Type Category/ Type Category/ Type Amount of Each Disbursement this Period 10. 10. 10 Category/ Type Amount of Each Disbursement this Period 10. 10 10. 10 Senate Primary General President Other (specify) ▼ State: District:	Hlexandeia V	H Zip Code 223	14	
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Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼ State: District:		NyC		10.00
President Other (specify) ▼ State: District:				·
State: District:		•		
SUBTOTAL of Disbursements This Page (optional)				
TOTAL This Period (last page this line number only)	SUBTOTAL of Disbursements This Page (optional)			30.00
	TOTAL This Period (last page this line number only).			60.14

SCHEDULE D) (FEC	Form 3X)
DEBTS AND	OBLIGA	TIONS

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE OF
FOR LINE NUMBER:
(check only one)

_		Humbered line)	1410
l	ME OF COMMITTEE (In Full) Conservative Victory Committee	CC	
	A. Full Name (Last, First, Middle Initial) of Debtor or Cleditor Saturn Corp., Mailing Address H701 Lydell Road City State MD Zip Code 20781	Nature of Debt (Pur Complete Scr	
	Outstanding Balance Beginning This Period		ce at Close of This Period
	B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Washing ton Intelligence Bureau Mailing Address 2727 Menlec Drive City State Fairfay VA 23031	Nature of Debt (Pur	Services
	Outstanding Balance Beginning This Period 22.30 Amount Incurred This Period Payment This Period	Outstanding Balan	ce at Close of This Period 22.30
	C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mailing Address City State Zip Code	Nature of Debt (Pur	oose):
	Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period	Outstanding Balan	ce at Close of This Period
)	SUBTOTALS This Period This Page (optional)	▶	1.391.37
_	TOTALS This Period (last page this line number only)		1,391.37 1,391.31
_	ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only		1,391,37

(3/2005)

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