

**FEC
FORM 3X**

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

RECEIVED
2010 OCT 18 AM 9:10
FEC MAIL CENTER
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

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) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

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

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

Election on

MM / DD / YYYY

in the State of

XX

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

- General (30G)
- Runoff (30R)
- Special (30S)

Election on

MM / DD / YYYY

in the State of

XX

5. Covering Period

07 / 01 / 2010

through

07 / 31 / 2010

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 Galliano

Date

10 / 18 / 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

10030450644

**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:

07 ' 01 ' 2010

To:

07 ' 31 ' 2010

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <u>2010</u>		<u>459883</u>
(b) Cash on Hand at Beginning of Reporting Period.....	<u>541340</u>	
(c) Total Receipts (from Line 19)	<u>2500 -</u>	<u>10500 -</u>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<u>791340</u>	<u>1509883</u>
7. Total Disbursements (from Line 31).....	<u>2250 -</u>	<u>943543</u>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<u>566340</u>	<u>566340</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

10030450645

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: **07** ' **07** ' **2010** To: **07** ' **31** ' **2010**

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).....

2500-

10500-

(ii) Unitemized

0

0

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

2500-

10500-

(b) Political Party Committees

0

0

(c) Other Political Committees (such as PACs).....

0

0

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

2500-

10500-

12. Transfers From Affiliated/Other Party Committees.....

0

0

13. All Loans Received.....

0

0

14. Loan Repayments Received.....

0

0

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

0

0

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

0

0

17. Other Federal Receipts (Dividends, Interest, etc.).....

0

0

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3).....

0

0

(b) Levin Funds (from Schedule H5).....

0

0

(c) Total Transfers (add 18(a) and 18(b))..

0

0

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

2500-

10500-

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

2500-

10500-

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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	2250-	628543
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	2250-	628543
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	0	3150-
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))	0	0
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))	0	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	2250-	943543
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	2250-	943543

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)	2500 -	10500 -
34. Total Contribution Refunds (from Line 28(d))	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2500 -	10500 -
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	2250 -	628543
37. Offsets to Operating Expenditures (from Line 15, page 3)	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2250 -	628543

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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:		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

A. Full Name (Last, First, Middle Initial) KAY McMillan		Date of Receipt 07 01 2010
Mailing Address 3006 ENGLEWOOD AVENUE		Amount of Each Receipt this Period 2000-
City ROS WELL	State Zip Code NM 8820	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000-
Name of Employer SELF	Occupation INVESTOR	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000-	

B. Full Name (Last, First, Middle Initial) RONNIE NICHOLAS		Date of Receipt 07 30 2010
Mailing Address 214 14 ST		Amount of Each Receipt this Period 500-
City CAN DO	State Zip Code ND 58324	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500-
Name of Employer SELF	Occupation FARMING	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500-	

C. Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		
City	State Zip Code	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional)	2500-
TOTAL This Period (last page this line number only)	2500-

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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	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"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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 (If Full)
CONSERVATIVE NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
JOHN GIZZI

Mailing Address
P.O. Box 101326

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

Purpose of Disbursement
ADMINISTRATIVE EXPENSE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement
07 / 07 / 2010

Amount of Each Disbursement this Period
2000-

Category/Type
001

B.

Full Name (Last, First, Middle Initial)
RALPH GALLIANO

Mailing Address
P.O. Box 101326

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

Purpose of Disbursement
ADMINISTRATIVE EXPENSE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement
07 / 12 / 2010

Amount of Each Disbursement this Period
250-

Category/Type
001

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

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) ▶

2250-

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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 Lstt Company		Nature of Debt (Purpose): List Rental
Mailing Address 1430 Springhill Road #490		
City McLean	State 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. Ebonle & Associates		Nature of Debt (Purpose): Fundraising
Mailing Address 1430 Springhill Road #490		
City McLean	State 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 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) ▶	

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SCHEDULE D (FEC Form 3X)
DEBTS AND OBLIGATIONS

Excluding Loans

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 Marilee 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
ARICO 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)	

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SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOI LINE NUMBER: (check only one)

0
 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)	3475619
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) ▶	

10030450653

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) <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 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 44,316	Amount Incurred This Period 0	Payment This Period 0	Outstanding Balance at Close of This Period 44,316
--	---	---------------------------------	--

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

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

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) ▶	

10030450654

**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. FEANBLANC**
Nature of Debt (Purpose): **LEGAL SERVICES**
Mailing Address: **1730 M ST NW**
City: **WASHINGTON** State: **DC** Zip Code: **20036**

Outstanding Balance Beginning This Period: **12,001.63**
Amount Incurred This Period: **0**
Payment This Period: **0**
Outstanding Balance at Close of This Period: **12,001.63**

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).....▶ **12,001.63**
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)▶ **9,493.082**

10030450655

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
10/18/10

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

Chap
 PREPARER
 (3/2005)

10/18/10
 DATE PREPARED

10030450656