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Image# 12952406690

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

										Office Us	e Only	
1.	NAME OF COMMITTEE (in		PE OR PI	RINT ▼		mple: If typi r the lines.	ng, type	12FE	4M5			
K	eep Conserv	atives Uni	ted									1
ADI	DRESS (number ar	nd street)	PO Box 97	7 275								
ř	Check if diff	erent										
H	than previous reported. (A	isly CC)	Raleigh					NC		27624		
2.	FEC IDENTIFIC	ATION NUM	BER ▼		CITY 🛦		5	STATE 🛦		2	ZIP COI	DE 🛦
	C C0049952	25		3	3. IS THIS REPORT		NEW (N) OR		AME (A)	NDED		
4.	TYPE OF REI	PORT	(b) Montl	rt 🔲	Feb 20 (M2)		May 20 (M5)		Aug 2	0 (M8)		Nov 20 (M11) (Non-Election Year Only)
	(a) Quarterly Re	ports:	Due	On:	Mar 20 (M3)		Jun 20 (M6)		Sep 2	0 (M9)		Dec 20 (M12) (Non-Election Year Only)
	April 15				Apr 20 (M4)		Jul 20 (M7)		Oct 20	(M10)		Jan 31 (YE)
		y Report (Q1)	(c)	12-Day	П	Primary (12F	P)	Ger	neral (1	2G)	П	Runoff (12R)
	X July 15 Quarterl	y Report (Q2)		PRE-Election Report for th		Convention	_	1	cial (12			, ,
	October Quarterl	15 y Report (Q3)		rioport for ti		Convention	(120)	Орс	olai (12	-0)		
	January Year-En	31 d Report (YE)		E	lection on	M M /	D D /	Y	Y		in the State of	
	July 31 Report	Mid-Year (Non-election nly) (MY)	(d)	30-Day		General (300	G)	Rur	noff (30	R)		Special (30S)
	Termina (TER)	tion Report		Report for th	ie:	M M /	D D /	Y = Y = Y	/ Y		in the	
	(IEN)			Е	lection on						State of	
5.	Covering Period	04	19		112	through	M M	30	D /	201	2	
l ce	ertify that I have e	yamined this	Renort an	d to the he	st of my kno	wledge and	helief it is tru	e correc	et and	complete		
	e or Print Name o		Bob Harris			moago ana						
		n ! !!							M = M	/ D	D /	YYYY
Sig	nature of Treasure	er <i>Bob Har</i>	ris			[Electronicall	y Filed] D	ate	07_	13	_	2012
NO [.]	TE: Submission of	false, erroneou	us, or inco	mplete inforn	nation may su	bject the per	son signing th	is Repor	t to the	penaltie	s of 2 L	J.S.C. §437g.
	Office					-				-	FOR	
	Use Only										ev. 12/20	

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Keep Conservatives United 04 19 2012 06 30 2012 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 147.56 January 1, 2012 (b) Cash on Hand at 3910.56 Beginning of Reporting Period..... 14025.00 25.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 3935.56 14172.56 6(a) and 6(c) for Column B)..... 483.05 10720.05 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 3452.51 3452.51 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 20500.00 Schedule C and/or Schedule D) 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)

Write or Type Committee Name

Keen	Conserv	atives	United
NOOP	COLISCIA	alives	Offica

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	0.00	0.00
(i) Itemized (use Schedule A)	0.00	0.00
		05.00
(ii) Uniternized	25.00	25.00
(iii) TOTAL (add	25.00	25.00
Lines 11(a)(i) and (ii)▶	23.00	25.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		
(such as PACs)	0.00	0.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)	25.00	25.00
. Transfers From Affiliated/Other		
Party Committees	0.00	0.00
F		
. All Loans Received	0.00	14000.00
. Loan Repayments Received	0.00	0.00
. Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
. Refunds of Contributions Made	,	, , , , , , , , , , , , , , , , , , , ,
to Federal Candidates and Other		
Political Committees	0.00	0.00
Other Federal Receipts		
(Dividends, Interest, etc.)	0.00	0.00
Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account	0.00	0.00
(from Schedule H3)	0.00	0.00
***************************************	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
(c) Total Transiers (add To(a) and To(b))	0.00	0.00
. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))	25.00	14025.00
	7	7
. Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	25.00	14025.00

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
. Operating Expenditures: (a) Allocated Federal/Non-Federal	10101 11110 1 61100	Calcilual Teal-IO-Date
Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) N 5 1 101	0.00	0.00
(ii) Non-Federal Share(b) Other Federal Operating	0.00	0.00
(b) Other Federal Operating Expenditures	483.05	483.05
(c) Total Operating Expenditures		
(add 21(a)(i), (a)(ii), and (b))▶	483.05	483.05
Transfers to Affiliated/Other Party		0.00
Committees Contributions to	0.00	0.00
Federal Candidates/Committees and Other Political Committees	0.00	0.00
Independent Expenditures		
(use Schedule E)	0.00	10237.00
Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0.00	
(use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loan riepayments Made		
Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other		
Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	
(such as PACs)	0.00	0.00
(d) Total Contribution Refunds		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))▶	0.00	0.00
(add Effect 20(a), (b), and (o),		
Other Disbursements	0.00	0.00
Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely	0.00	0.00
With Federal Funds	0.00	7
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	483.05	10720.08
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	483.05	10720.05

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
3. Total Contributions (other than loans) (from Line 11(d), page 3)	25.00	25.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	25.00	25.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	483.05	483.05
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
Net Operating Expenditures (subtract Line 37 from Line 36)	483.05	483.05

SC	CHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 6 OF 9				
IT	EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only one)				
		Detailed Summary Page	X 21b	22 23 28a 28			
Δ۳	y information copied from such Reports and Staten	ente may not be sold or us					
	for commercial purposes, other than using the name						
\	NAME OF COMMITTEE (In Full)						
\rangle	Keep Conservatives United						
^	Full Name (Last, First, Middle Initial)			B			
A.	CM&Co, LLC	Date of Disbu					
	Mailing Address PO Box 97275				08 2012		
	•	State Zip Code		Transaction	ID : SB21B.4217		
	Raleigh	NC 27624		าาสการสบบบป			
	Purpose of Disbursement Accounting Services			Amount of Ea	ch Disbursement this Period		
	Candidate Name		Category/		481.67		
	Office Sought: House Disbursen	nent For:	Туре				
		Primary General					
	President	Other (specify) ▼					
	State: District:						
В.	Full Name (Last, First, Middle Initial)			Data of Diah	reamant		
٠.				Date of Disbursement			
	Mailing Address				M = M / D = D / Y = Y = Y		
	City	State Zip Code					
	Purpose of Disbursement	Amount of Fa	ch Disbursement this Period				
	Candidate Name	Category/	Amount of Ea	on Dispursoment this Fellou			
	Office Sought: House Disbursen						
		Other (appoint) General					
	President State: District:	Other (specify) ▼					
_	Full Name (Last, First, Middle Initial)						
C.		,					
	Mailing Address			M = M /) D / Y Y Y Y		
	Mailing Address						
	City						
	Purpose of Disbursement						
	Candidate Name Category/ Type				ch Disbursement this Period		
	Office Sought: House Disbursen	nent For:	.,,,,	7			
		Primary General					
	President	Other (specify) ▼					
	State: District:						
_	UDTOTAL ACRIBAN				481.67		
S	UBTOTAL of Disbursements This Page (optional)		·····•		401.07		
т	OTAL This Period (last page this line number only)				481.67		
	**		-	7	,		

SCHEDULE C (FEC Form 3X) LOANS

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

PAGE 7 OF 9

		Detailed	Summary Page	FOR LINE	13 OF FORM 3X
AME OF COMMITTEE (In Full)		•	Transact	tion ID : SC/10.	1103
Keep Conservatives United					
LOAN SOURCE Full Name (Last, First, Name Bob Harris	Middle Initial)		Ele	ection: Primary General	
Mailing Address PO Box 97275				Other (specify	') ▼
City Raleigh	State NC ZIP Co	de 27624	_		
Original Amount of Loan	Cumulative Payment To		Balance	Outstanding at	Close of This Period
3500.00		0.	00	,	3500.00
TERMS Date Incurred	Date Due		Interest Rate		Secured:
M 08 / 30 / Y Y Y Y Y	M M / D D / Y	DEMAND	0.00	% (apr)	Yes X No
List All Endorsers or Guarantors (if any)	to Loan Source				
Full Name (Last, First, Middle Initial)		Name of E	mployer		
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding		, .	
2. Full Name (Last, First, Middle Initial)		Name of E	mployer		
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding			
3. Full Name (Last, First, Middle Initial)		Name of E	mployer		
Mailing Address		Occupation	l		
City State	ZIP Code	Amount Guaranteed Outstanding			
4. Full Name (Last, First, Middle Initial)		Name of E	mployer		
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding			
SUBTOTALS This Period This Page (optiona	ul)		>		3500.00
OTALS This Period (last page in this line o	nly)		>	,	
Carry outstanding balance only to LINE 3, S	Schedule D, for this line. If	no Schedule	e D, carry forward	to appropriate	e line of Summary.

SCHEDULE C (FEC Form 3X) LOANS

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

PAGE 8 OF 9
FOR LINE 13 OF FORM 3X

	Detailed Sulfilliary Page
AME OF COMMITTEE (In Full)	Transaction ID : SC/10.4104
Keep Conservatives United	
LOAN SOURCE Full Name (Last, First, Middle Initial)	Election:
Bob Harris	Primary
Mailing Address	General Other (specify) ▼
Mailing Address PO Box 97275	Other (specify)
City Raleigh State NC	ZIP Code 27624
Original Amount of Loan Cumulative Pay	yment To Date Balance Outstanding at Close of This Period
3000.00	0.00 3000.00
TERMS Date Incurred D	ate Due Interest Rate Secured:
M = M / D = D / Y = Y = Y = Y = M = M / D = D	ON DEMAND 0.00
09 03 2011	ON DEMAND 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any) to Loan Source	
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed
Only State ZIF Code	Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed
Oily State Zir Gode	Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
Walling Address	Coodpanion
	Amount
City State ZIP Code	Guaranteed
4. Full Name (Last, First, Middle Initial)	Outstanding:
4. I uli Ivallie (Last, Filst, Iviluule Ililliai)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed
Oity State ZIF Code	Outstanding:
	L
	2222
SUBTOTALS This Period This Page (optional)	3000.00
OTALS This Period (last page in this line only)	•
Carry outstanding balance only to LINE 3, Schedule D, for this	s line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X) LOANS

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

PAGE 9 OF 9
FOR LINE 13 OF FORM 3X

	Detailed Summary Fage
AME OF COMMITTEE (In Full)	Transaction ID : SC/10.4189
Keep Conservatives United	
LOAN SOURCE Full Name (Last, First, Middle Initial)	Election:
Bob Harris	Primary
	General
Mailing Address PO Box 97275	Other (specify) ▼
City Raleigh State NC ZIP	Code 27624
Original Amount of Loan Cumulative Payment	t To Date Balance Outstanding at Close of This Period
14000.00	0.00
TERMS	
Date Incurred Date D	
03 17 2012	ON DEMAND 0.00 % (apr) Yes No
List All Endorsers or Guarantors (if any) to Loan Source	
1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State 7ID Code	Amount Guaranteed
City State ZIP Code	Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
0.1	Amount
City State ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Cooungtion
Mailing Address	Occupation
	Amount
City State ZIP Code	Guaranteed
	Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Guaranteed Outstanding:
	'
UBTOTALS This Period This Page (optional)	
OTALS This Period (last page in this line only)	20500.00
Carry outstanding balance only to LINE 3, Schedule D, for this line	. If no Schedule D, carry forward to appropriate line of Summary.