

**HAND DELIVERED**

**FEC  
FORM 3X**

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

RECEIVED

2014 OCT 16 PM 12:11  
Office Use Only

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

**CONSERVATIVE NATIONAL COMMITTEE**

ADDRESS (number and street) **PO 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: ☐ 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  /  /  in the State of

- (d) 30-Day POST-Election Report for the: ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on  /  /  in the State of

5. Covering Period **09 01 2014** through **09 30 2014**

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 J. Galliano*

Date **10 16 2014**

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:

09 ' 01 ' 2014

To:

09 ' 30 ' 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2014		4033
(b) Cash on Hand at Beginning of Reporting Period.....	0	
(c) Total Receipts (from Line 19).....	0	0
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	0	4033
7. Total Disbursements (from Line 31).....	0	4033
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	0	0
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	9493082	



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

CONSERVATIVE NATIONAL COMMITTEE

Report Covering the Period:

From:

09 ' 09 ' 2014

To:

09 ' 30 ' 2014

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).....▶

# **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)) .....	0	4033
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)) .....	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	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	0	4033
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) .....	0	4033

# **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)) .....		4033
37. Offsets to Operating Expenditures (from Line 15, page 3) .....		
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....		4033

**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 LIST 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

State

Zip Code

Outstanding Balance Beginning This Period

**3,915.60**

Amount Incurred This Period

**0**

Payment This Period

**0**

Outstanding Balance at Close of This Period

**3,915.60**

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**

FROM THE NCGO

**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 State

**Vienna VA**

Zip Code

**22180**

Outstanding Balance Beginning This Period

**1,538.77**

Amount Incurred This Period

**0**

Payment This Period

**0**

Outstanding Balance at Close of This Period

**1,538.77**

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

**WIB**

Nature of Debt (Purpose):

**Mailing Services**

Mailing Address

**2727 Merrilee Drive**

City State

**Fairfax VA**

Zip Code

**22031**

Outstanding Balance Beginning This Period

**11,227.10**

Amount Incurred This Period

**0**

Payment This Period

**0**

Outstanding Balance at Close of This Period

**11,227.10**

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

**Fairfax VA 22031**

Zip Code

Outstanding Balance Beginning This Period

**11,651.63**

Amount Incurred This Period

**0**

Payment This Period

**0**

Outstanding Balance at Close of This Period

**11,651.63**

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) ▶

**24,417.50**

**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

State

**BELTSVILLE**

Zip Code

**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

**Carter, Kent & Sullivan**

Nature of Debt (Purpose):

**Legal Services**

Mailing Address

**2020 K Street NW**

City

State

**Washington 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**

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**



**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).....▶

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)▶

**229720**

**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. Jeanblanc**

Nature of Debt (Purpose):

**Legal Services**

Mailing Address

**1730 M St. NW**

City State

**Washington 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)..... ▶


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) ▶

**12,001.63**  
**9,493.82**

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.

<input checked="checked" type="checkbox"/> Hand Delivered	Date of Receipt 10/16/14
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
 PREPARER (8/2013)	10/16/14 DATE PREPARED