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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines.

12FE4M5

RENASANT BANK Employees' Voluntary Political Committee

ADDRESS (number and street)

209 Troy Street

Check if different than previously reported. (ACC)

Tupelo

MS

38804

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C 00191759

3. IS THIS REPORT

X 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)
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)
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

10 01 2010

through

11 22 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

ANN McMILLAN

Signature of Treasurer

Ann McMillan

Date

11 23 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

10030494754

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

RENASANT Bank Employees' Voluntary Political Committee

Report Covering the Period: From:

MM ' DD ' YYYY
10 ' 01 ' 2010

To:

MM ' DD ' YYYY
11 ' 22 ' 2010

10030494755

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2010	2010	39,866.25
(b) Cash on Hand at Beginning of Reporting Period	36,135.27	
(c) Total Receipts (from Line 19)	4,591.95	23,860.97
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	40,727.22	63,727.22
7. Total Disbursements (from Line 31)	6,500.00	29,500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	34,227.22	34,227.22
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)		

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

RENESSANT BANK Employees' Voluntary Political Committee

Report Covering the Period:

From:

10 01 2010

To:

11 22 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).....

4,591.95

23,860.97

(ii) Unitemized.....

4,591.95

23,860.97

(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).....

4,591.95

23,860.97

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)).....

4,591.95

23,860.97

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

10030494756

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.....	3,000.00	22,000.00
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	3,500.00	7,500.00
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).....	6,500.00	29,500.00

10030494757

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)	45,919.95	23,860.97
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	45,919.95	23,860.97
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)		

10030494758

**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

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)

RENASANT BANK Employees Voluntary Political Committee

Full Name (Last, First, Middle Initial)

A. TRAVIS Childers for Congress

Date of Disbursement

10 / 18 / 2010

Mailing Address

P.O. Box 177

City

Booneville

State

MS

Zip Code

38829

Purpose of Disbursement

Contribution

011

Amount of Each Disbursement this Period

1,500.00

Candidate Name

TRAVIS Childers

Category/
Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State: MS

District: 1st

Full Name (Last, First, Middle Initial)

B. ALAN Nunnelee for Congress

Date of Disbursement

10 / 18 / 2010

Mailing Address

P.O. Box 7092

City

Tupelo

State

MS

Zip Code

38802

Purpose of Disbursement

Contribution

011

Amount of Each Disbursement this Period

1,500.00

Candidate Name

ALAN Nunnelee

Category/
Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State: MS

District: 1st

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

MM / DD / YYYY

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

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).....▶

3,000.00

10030494759

**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 2

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" 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 (In Full)

RENASANT BANK Employees' Voluntary Political Committee

Full Name (Last, First, Middle Initial)

Date of Disbursement

A. Paul Funderbark for Circuit Court Judge

Mailing Address: **P.O. Box 1851**

City: **Tupelo** State: **MS** Zip Code: **38802**

Purpose of Disbursement: **Contribution**

Candidate Name: **Paul Funderbark**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Amount of Each Disbursement this Period: **1,000.00**

Category/Type: **011**

B. Bill Haslan for GOVERNOR

Mailing Address: **1701 West End Ave. Suite 300**

City: **Nashville** State: **TN** Zip Code: **37203**

Purpose of Disbursement: **Contribution**

Candidate Name: **Bill Haslan**

Office Sought: **GOVERNOR**

Disbursement For: Primary General Other (specify) ▼

State: **TN** District: _____

Amount of Each Disbursement this Period: **1,000.00**

Category/Type: **011**

C. Committee to Re-Elect Judge DONNA BARNES

Mailing Address: **P.O. Box 4383**

City: **Tupelo** State: **MS** Zip Code: **38801**

Purpose of Disbursement: **Contribution**

Candidate Name: **DONNA BARNES**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

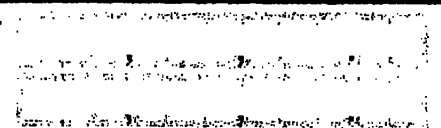
State: _____ District: _____

Amount of Each Disbursement this Period: **1,000.00**

Category/Type: **011**

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

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



10030494760

**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 2 OF 2
	<input type="checkbox"/> 21b <input type="checkbox"/> 27	<input type="checkbox"/> 22 <input type="checkbox"/> 28a	<input type="checkbox"/> 23 <input type="checkbox"/> 28b	<input type="checkbox"/> 24 <input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 25 <input checked="" type="checkbox"/> 29	<input type="checkbox"/> 26 <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 (In Full)
RENASANT BANK Employees' Voluntary Political Committee

Full Name (Last, First, Middle Initial) A. BRANDON PRESLEY CAMPAIGN		Date of Disbursement 11 / 10 / 2010	
Mailing Address 218 MAIN ST.		Amount of Each Disbursement this Period 500.00	
City Nettleton	State MS		Zip Code 38858
Purpose of Disbursement CONTRIBUTION	Category/Type 011		
Candidate Name BRANDON PRESLEY			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) GENERAL FUND		
State: District:			

Full Name (Last, First, Middle Initial) B.		Date of Disbursement
Mailing Address		
City	State	Zip Code
Purpose of Disbursement	Category/Type	
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement
Mailing Address		
City	State	Zip Code
Purpose of Disbursement	Category/Type	
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	▶	
TOTAL This Period (last page this line number only).....	▶	3,500.00

10030494761

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.

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USPS Express Mail Postmarked

Postmark Illegible

No Postmark

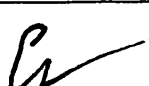
Overnight Delivery Service (Specify): **Fed Ex** Shipping Date
11/26/10
 Next Business Day Delivery

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

 11/29/10
 PREPARER DATE PREPARED

10030494762

10030494763

**FEC
FORM 3X**

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

RECEIVED
2010 NOV 29 AM 9:15
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) 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:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <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 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 MM / DD / YYYY in the State of

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

Election on 11 / 02 / 2010 in the State of US

5. Covering Period 10 / 14 / 2010 through 11 / 23 / 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 J. Galliano

Date

11 / 29 / 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							
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FEC FORM 3X
Rev. 12/2004

10030494764

**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:

10 ' 14 ' 2010

To:

11 ' 23 ' 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>4000-</u>	<u>15500-</u>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<u>941340</u>	<u>2009883</u>
7. Total Disbursements (from Line 31)	<u>7400-</u>	<u>1808543</u>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<u>201340</u>	<u>201340</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

10030494765

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: **10** / **14** / **2010** To: **11** / **22** / **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).....

4,000.00 -

1,550.00 -

(ii) Unitemized

0.00 -

0.00 -

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

4,000.00 -

1,550.00 -

(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)

4,000.00 -

1,550.00 -

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

0.00 -

0.00 -

13. All Loans Received

0.00 -

0.00 -

14. Loan Repayments Received.....

0.00 -

0.00 -

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

0.00 -

0.00 -

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

0.00 -

0.00 -

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

0.00 -

0.00 -

18. Transfers from Non-Federal and Levin Funds

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

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 -

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

4,000.00 -

1,550.00 -

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

4,000.00 -

1,550.00 -

10030494766

DETAILED SUMMARY PAGE
of Disbursements

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	1,750.-	9,285.43
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1,750.-	9,285.43
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	56,500.-	880.00
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))..	7,400.-	18,085.43
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7,400.-	18,085.43

10030494767

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)	4000-	15500-
34. Total Contribution Refunds (from Line 28(d))	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4000-	15500-
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1750-	928543
37. Offsets to Operating Expenditures (from Line 15, page 3)	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1750-	928543

10030494768

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 1 OF 2
(check only one)
 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. **RICHARD K WAGNER**

Mailing Address

13622 RUSHMORE LANE

City State Zip Code

SANTA ANA, CA 92705

FEC ID number of contributing federal political committee.

C

Name of Employer

ARKW DEVELOPMENT CORP

Occupation

REAL ESTATE DEVELOPMENT

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

500 -

Date of Receipt

NOV ' 10 ' 20 ' 2010

Amount of Each Receipt this Period

500 -

Full Name (Last, First, Middle Initial)

B. **MICHAEL J. SCHROEDER**

Mailing Address

32 MORRO BAY DRIVE

City State Zip Code

CORONA DELMAR CA 92625

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

NOV ' 10 ' 28 ' 2010

Amount of Each Receipt this Period

500 -

Full Name (Last, First, Middle Initial)

C. **JAMES W. RAPPAPORT**

Mailing Address

206 WINDSOR ROAD

City State Zip Code

WABAN MA 02468

FEC ID number of contributing federal political committee.

C

Name of Employer

NEW BOSTON FUND

Occupation

FINANCE

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

2000 -

Date of Receipt

NOV ' 10 ' 28 ' 2010

Amount of Each Receipt this Period

2000 -

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

[Empty boxes for subtotal and total]

10030494769

**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 2 OF 2

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
13	14	15	16	

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NAME OF COMMITTEE (In Full)

CONSERVATIVE NATIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. GENE JOHNSTON

Mailing Address

100 BEACH DRIVE NE APT 1402

City ST. PETERSBURG State FL Zip Code 33701

FEC ID number of contributing federal political committee.

C

Name of Employer

RETIRED

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

1000

Date of Receipt

11 / 05 / 2010

Amount of Each Receipt this Period

1000

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) ▶

4000

10030494770

**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: <u>1</u> OF <u>1</u>		
	<input checked="" type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29

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NAME OF COMMITTEE (in Full)
CONSERVATIVE NATIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. JOHN GIZZI		Date of Disbursement 11 / 08 / 2010
Mailing Address P.O. Box 101326		
City ARLINGTON	State VA	Zip Code 22210
Purpose of Disbursement ADMINISTRATIVE EXPENSE	Category/Type 001	Amount of Each Disbursement this Period 1750
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement
Mailing Address		
City	State	Zip Code
Purpose of Disbursement	Category/Type	Amount of Each Disbursement this Period
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement
Mailing Address		
City	State	Zip Code
Purpose of Disbursement	Category/Type	Amount of Each Disbursement this Period
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

SUBTOTAL of Disbursements This Page (optional)	
TOTAL This Period (last page this line number only)	1750

10030494771

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CONSERVATIVE NATIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. **TANCREDO for GOVERNOR**

Mailing Address

202 N AVENUE #2010

City

GRAND JUNCTION

State

CO

Zip Code

81501

Purpose of Disbursement

POLITICAL CONTRIBUTION

Candidate Name

TOM TANCREDO

011

Category/
Type

Date of Disbursement

10' 29' 2010

Amount of Each Disbursement this Period

250.-

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

GOVERNOR

State: **CO**

District:

Full Name (Last, First, Middle Initial)

B. **BACHMANN for CONGRESS**

Mailing Address

P.O. Box 25950

City

WOODBURY

State

MN

Zip Code

55125

Purpose of Disbursement

POLITICAL CONTRIBUTION

Candidate Name

MICHELE BACHMANN

011

Category/
Type

Date of Disbursement

10' 29' 2010

Amount of Each Disbursement this Period

200.-

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: **MN**

District: **6**

Full Name (Last, First, Middle Initial)

C. **CRAVACK for CONGRESS CAMPAIGN COMMITTEE**

Mailing Address

P.O. Box 951

City

NORTH BRANCH

State

MN

Zip Code

55056-0951

Purpose of Disbursement

POLITICAL CONTRIBUTION

Candidate Name

CHIP CRAVACK

011

Category/
Type

Date of Disbursement

10' 29' 2010

Amount of Each Disbursement this Period

250.-

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: **MN**

District: **8**

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

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

10030494772

**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 2 OF 8
	<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	
	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b	

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NAME OF COMMITTEE (In Full)
CONSERVATIVE NATIONAL COMMITTEE

A. **VAN TRAN for CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address: **3337 SO. BRISTOL ST #49**

City: **SANTA ANA** State: **CA** Zip Code: **92704**

Purpose of Disbursement: **POLITICAL CONTRIBUTION** Category/Type: **011**

Candidate Name: **VAN TRAN**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: **CA** District: **47**

Date of Disbursement: **10/29/2010**

Amount of Each Disbursement this Period: **250-**

B. **SEAN BIELAT for CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address: **P.O. BOX 1143**

City: **BROOKLINE** State: **MA** Zip Code: **02446**

Purpose of Disbursement: **POLITICAL CONTRIBUTION** Category/Type: **011**

Candidate Name: **SEAN BIELAT**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: **MA** District: **4**

Date of Disbursement: **10/29/2010**

Amount of Each Disbursement this Period: **250-**

C. **GARDNER for CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address: **P.O. BOX 2408**

City: **LOVELAND** State: **CO** Zip Code: **80539**

Purpose of Disbursement: **POLITICAL CONTRIBUTION** Category/Type: **011**

Candidate Name: **CORY GARDNER**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: **CO** District: **4**

Date of Disbursement: **10/29/2010**

Amount of Each Disbursement this Period: **200-**

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

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

10030494773

**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 3 OF 8

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CONSERVATIVE NATIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. JEFF PERRY FOR CONGRESS		Date of Disbursement
Mailing Address P.O. Box 1435		10 / 29 / 2010
City SANDWICH	State MA	Zip Code 02563
Purpose of Disbursement POLITICAL CONTRIBUTION		Amount of Each Disbursement this Period
Candidate Name JEFF PERRY	Category/Type 0.11	200-
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MA District: 10		

B. MARTY LAMB FOR CONGRESS		Date of Disbursement
Mailing Address 57 WINGATE ROAD		10 / 29 / 2010
City HOLLISTON	State MA	Zip Code 01746
Purpose of Disbursement POLITICAL CONTRIBUTION		Amount of Each Disbursement this Period
Candidate Name MARTY LAMB	Category/Type 0.11	200-
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MA District: 3		

C. STEVE PEARCE FOR CONGRESS		Date of Disbursement
Mailing Address P.O. Box 2696		10 / 29 / 2010
City HOBBS	State NM	Zip Code 88241
Purpose of Disbursement POLITICAL CONTRIBUTION		Amount of Each Disbursement this Period
Candidate Name STEVE PEARCE	Category/Type 0.11	200-
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NM District: 2		

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

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

10030494774

**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 4 OF 8

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CONSERVATIVE NATIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. **PAT MEEHAN FOR CONGRESS**

Date of Disbursement

10 / 29 / 2010

Mailing Address

1051 PONTIAC ROAD

City

DREXEL HILL

State

PA

Zip Code

19026

Purpose of Disbursement

POLITICAL CONTRIBUTION

Q11

Amount of Each Disbursement this Period

200-

Candidate Name

PAT MEEHAN

Category/
Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State: PA

District: 7

Full Name (Last, First, Middle Initial)

B. **JOE MILLER FOR US SENATE**

Date of Disbursement

10 / 29 / 2010

Mailing Address

P.O. Box 72838

City

FAIRBANKS

State

AK

Zip Code

99707-2838

Purpose of Disbursement

POLITICAL CONTRIBUTION

Q11

Amount of Each Disbursement this Period

500-

Candidate Name

JOE MILLER

Category/
Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State: AK

District:

Full Name (Last, First, Middle Initial)

C. **RUBIO FOR SENATE**

Date of Disbursement

10 / 29 / 2010

Mailing Address

2030 SOUTH DOUGLAS ROAD, #105

City

CORAL GABLES

State

FL

Zip Code

33134

Purpose of Disbursement

POLITICAL CONTRIBUTION

Q11

Amount of Each Disbursement this Period

250-

Candidate Name

MARCO RUBIO

Category/
Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State: FL

District:

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

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

10030494775

**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 5 OF 8

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CONSERVATIVE NATIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. RAESE for SENATE COMMITTEE

Date of Disbursement

10' 29' 2010

Mailing Address

P.O. BOX 262

City

MORGANTOWN

State

WV

Zip Code

26507

Purpose of Disbursement

POLITICAL CONTRIBUTION

0.1.1

Candidate Name

JOHN RAESE

Category/
Type

Amount of Each Disbursement this Period

250

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: WV

District:

Full Name (Last, First, Middle Initial)

B. TOOMEY for SENATE

Date of Disbursement

10' 29' 2010

Mailing Address

3440 HAMILTON BLVD

City

ALLENTOWN

State

PA

Zip Code

18103

Purpose of Disbursement

POLITICAL CONTRIBUTION

0.1.1

Candidate Name

PAT TOOMEY

Category/
Type

Amount of Each Disbursement this Period

250

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: PA

District:

Full Name (Last, First, Middle Initial)

C. FRIENDS OF SHARRON ANGLE

Date of Disbursement

10' 29' 2010

Mailing Address

P.O. BOX 33058

City

RENO

State

NV

Zip Code

89533

Purpose of Disbursement

POLITICAL CONTRIBUTION

0.1.1

Candidate Name

SHARRON ANGLE

Category/
Type

Amount of Each Disbursement this Period

250

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: NV

District:

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

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

10030494776

**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)

<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)

CONSERVATIVE NATIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. **RON JOHNSON FOR US SENATE**

Date of Disbursement

10 / 29 / 2010

Mailing Address

P.O. BOX 1159

City

OSHKOSH

State

WI

Zip Code

54903-1159

Purpose of Disbursement

POLITICAL CONTRIBUTION

011

Candidate Name

RON JOHNSON

Category/
Type

Amount of Each Disbursement this Period

250-

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: WI

District:

Full Name (Last, First, Middle Initial)

B. **ROSSI FOR SENATE**

Date of Disbursement

10 / 29 / 2010

Mailing Address

P.O. BOX 50713

City

BELLEVUE

State

WA

Zip Code

98015

Purpose of Disbursement

POLITICAL CONTRIBUTION

011

Candidate Name

DINO ROSSI

Category/
Type

Amount of Each Disbursement this Period

500-

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: WA

District:

Full Name (Last, First, Middle Initial)

C. **RAND PAUL FOR US SENATE**

Date of Disbursement

10 / 29 / 2010

Mailing Address

1019 STATE STREET

City

BOWLING GREEN

State

KY

Zip Code

42101

Purpose of Disbursement

POLITICAL CONTRIBUTION

011

Candidate Name

RAND PAUL

Category/
Type

Amount of Each Disbursement this Period

250-

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: KY

District:

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

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

.....

.....

1003049477

**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 7 OF 8

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CONSERVATIVE NATIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. CARLY FIORINA for CALIFORNIA

Mailing Address: 915 L STREET, SUITE C-378

City: SACRAMENTO State: CA Zip Code: 95814

Purpose of Disbursement: POLITICAL CONTRIBUTION

Candidate Name: CARLY FIORINA

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: CA District:

Date of Disbursement: 10/29/2010

Amount of Each Disbursement this Period: 250-

B. FRIENDS OF CHRISTINE O'DONNELL

Mailing Address: P.O. Box 3987

City: WILMINGTON State: DE Zip Code: 19807

Purpose of Disbursement: POLITICAL CONTRIBUTION

Candidate Name: CHRISTINE O'DONNELL

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: DE District:

Date of Disbursement: 10/29/2010

Amount of Each Disbursement this Period: 250-

C. BUCK for COLORADO

Mailing Address: P.O. Box 101465

City: DENVER State: CO Zip Code: 80250

Purpose of Disbursement: POLITICAL CONTRIBUTION

Candidate Name: KEN BUCK

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: CO District:

Date of Disbursement: 10/29/2010

Amount of Each Disbursement this Period: 250-

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

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

Empty boxes for subtotal and total amounts.

10030494778

**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 <u>8</u> OF <u>8</u>			
	<input type="checkbox"/> 21b <input type="checkbox"/> 27	<input type="checkbox"/> 22 <input type="checkbox"/> 28a	<input checked="" type="checkbox"/> 23 <input type="checkbox"/> 28b	<input type="checkbox"/> 24 <input type="checkbox"/> 28c	<input type="checkbox"/> 25 <input type="checkbox"/> 29	<input type="checkbox"/> 26 <input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CONSERVATIVE NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ALLEN WEST for CONGRESS

Mailing Address
P.O. Box 1028

City State Zip Code
DEERFIELD BEACH FL 33441

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name
ALLEN WEST

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: **FL** District: **22**

Date of Disbursement
10 / 31 / 2010

Amount of Each Disbursement this Period
200.00

B. 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

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

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

TOTAL This Period (last page this line number only)..... ▶ **565.00**

10030494779

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. Eberle & 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 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)	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) ▶	

10030494780

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 Marilee 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) ▶

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) ▶

10030494781

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

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
Andrew S 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
Carter, 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
282598.8

Amount Incurred This Period
0

Payment This Period
0

Outstanding Balance at Close of This Period
282598.8

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)	34756.14
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)

FOR LINE NUMBER: (check only one)

9
40

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

8,752.22

Amount Incurred This Period

0

Payment This Period

0

Outstanding Balance at Close of This Period

8,752.22

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

9,788.22

Amount Incurred This Period

0

Payment This Period

0

Outstanding Balance at Close of This Period

9,788.22

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) ▶

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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) <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 JAMES K. JEANBLANC	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
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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
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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
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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)▶	949308.2

10030494784

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.

10030494785

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>Fed Ex</i>	Shipping Date <i>11/26/10</i>
Next Business Day Delivery <input checked="" 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	<i>11/29/10</i> DATE PREPARED