

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
HOUSE CONSERVATIVES FUND

ADDRESS (number and street) P.O. Box 2752  
 Check if different than previously reported. (ACC)  
Washington DC 20013

2. **FEC IDENTIFICATION NUMBER** C00326439  
**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 Quarterly 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 (12G)  
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 07 01 2009 through 07 31 2009

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 Pamela Sederholm

Signature of Treasurer Electronically Filed by Pamela Sederholm Date 08 20 2009

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**

Write or Type Committee Name  
HOUSE CONSERVATIVES FUND

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	7

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		45838.26
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	51603.19									
(c) Total Receipts (from Line 19) .....	40720.96	330930.75								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	92324.15	376769.01								
7. Total Disbursements (from Line 31) .....	48661.88	333106.74								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	43662.27	43662.27								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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  
HOUSE CONSERVATIVES FUND

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	7

D	D
3	1

Y	Y	Y	Y
2	0	0	9

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) .....	7288.00	54714.00
(ii) Unitemized .....	21932.96	136580.03
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	29220.96	191294.03
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	11500.00	139636.72
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	40720.96	330930.75
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 Transfer (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)) .....	40720.96	330930.75
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	40720.96	330930.75

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	48661.88	333056.74
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	48661.88	333056.74
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	50.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	50.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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 With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	48661.88	333106.74
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	48661.88	333106.74

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 24

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) .....	40720.96	330930.75
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	50.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	40720.96	330880.75
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	48661.88	333056.74
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	48661.88	333056.74

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 24  
(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)  
**HOUSE CONSERVATIVES FUND**

**A.** Full Name (Last, First, Middle Initial)  
Mr A Bourgeois, Ret  
Mailing Address 10100 Hillview Dr Apt 608  
City State Zip Code  
**Pensacola FL 32514-5460**  
Date of Receipt  
M M / D D / Y Y Y Y  
07 / 20 / 2009  
**Transaction ID: SA11AI.14782**  
Amount of Each Receipt this Period  
50.00  
FEC ID number of contributing federal political committee. C  
Name of Employer retired Occupation retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 205.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs Susan Burnoff  
Mailing Address 334 W Cedar St  
City State Zip Code  
**New Holland PA 17557**  
Date of Receipt  
M M / D D / Y Y Y Y  
07 / 01 / 2009  
**Transaction ID: SA11AI.14112**  
Amount of Each Receipt this Period  
105.00  
FEC ID number of contributing federal political committee. C  
Name of Employer retired Occupation retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs John A Campbell  
Mailing Address 900 Seminole Rd  
City State Zip Code  
**Radcliff KY 40160-2241**  
Date of Receipt  
M M / D D / Y Y Y Y  
07 / 15 / 2009  
**Transaction ID: SA11AI.14539**  
Amount of Each Receipt this Period  
45.00  
FEC ID number of contributing federal political committee. C  
Name of Employer self Occupation homemaker  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 205.00

**SUBTOTAL** of Receipts This Page (optional) ..... 200.00  
**TOTAL** This Period (last page this line number only) .....

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 24  
(check only one)

<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

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NAME OF COMMITTEE (In Full)  
**HOUSE CONSERVATIVES FUND**

**A.** Full Name (Last, First, Middle Initial)  
Ms Eleanor Cobb

Mailing Address 131 South Vista St

City State Zip Code  
**Los Angeles CA 90036**

FEC ID number of contributing federal political committee. C

Name of Employer retired Occupation retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt MM / DD / YYYY  
07 / 20 / 2009

**Transaction ID:** SA11AI.14867

Amount of Each Receipt this Period 300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr Paul Decleva

Mailing Address 350 N St Paul Ste 1625

City State Zip Code  
**Dallas TX 75201-4259**

FEC ID number of contributing federal political committee. C

Name of Employer self employed Occupation consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt MM / DD / YYYY  
07 / 15 / 2009

**Transaction ID:** SA11AI.14610

Amount of Each Receipt this Period 150.00

**C.** Full Name (Last, First, Middle Initial)  
Richard Griffith

Mailing Address P O Box 91610

City State Zip Code  
**Lafayette LA 70509-1610**

FEC ID number of contributing federal political committee. C

Name of Employer information requested Occupation information requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY  
07 / 01 / 2009

**Transaction ID:** SA11AI.14085

Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... 1450.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 24  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**HOUSE CONSERVATIVES FUND**

**A.** Full Name (Last, First, Middle Initial)  
Mr. Richard S. Griffith

Mailing Address 3417 Milam St

City State Zip Code  
Houston TX 77002

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
richard griffith investor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1400.00

Date of Receipt MM / DD / YYYY  
07 / 01 / 2009

**Transaction ID:** SA11AI.14089

Amount of Each Receipt this Period 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Richard S. Griffith

Mailing Address 3417 Milam St

City State Zip Code  
Houston TX 77002

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
richard griffith investor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1650.00

Date of Receipt MM / DD / YYYY  
07 / 06 / 2009

**Transaction ID:** SA11AI.14282

Amount of Each Receipt this Period 250.00

**C.** Full Name (Last, First, Middle Initial)  
Ms Mary Gulino

Mailing Address 4200 Old Columbia Pike

City State Zip Code  
Annandale VA 22003-2122

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt MM / DD / YYYY  
07 / 15 / 2009

**Transaction ID:** SA11AI.14571

Amount of Each Receipt this Period 75.00

**SUBTOTAL** of Receipts This Page (optional) ..... 1325.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 24  
(check only one)

<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

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NAME OF COMMITTEE (In Full)  
**HOUSE CONSERVATIVES FUND**

**A.** Full Name (Last, First, Middle Initial)  
Ms Mary Koessler

Mailing Address 6122 Old Lake Shore Rd

City State Zip Code  
**Lake View NY 14085-9547**

FEC ID number of contributing federal political committee. C

Name of Employer retired Occupation retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 15 / 2009

**Transaction ID: SA11AI.14518**

Amount of Each Receipt this Period 500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr John A Lupoli

Mailing Address 10128 Maroon St

City State Zip Code  
**El Monte CA 91733-2062**

FEC ID number of contributing federal political committee. C

Name of Employer retired Occupation retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 07 / 15 / 2009

**Transaction ID: SA11AI.14528**

Amount of Each Receipt this Period 75.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs Helen Marshall

Mailing Address 827 Susan Ave

City State Zip Code  
**Woodstock VA 22664-1133**

FEC ID number of contributing federal political committee. C

Name of Employer retired Occupation retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 01 / 2009

**Transaction ID: SA11AI.14105**

Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... 675.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 24  
(check only one)

<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

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NAME OF COMMITTEE (In Full)  
**HOUSE CONSERVATIVES FUND**

**A.** Full Name (Last, First, Middle Initial)  
Mrs Helen Marshall

Mailing Address **827 Susan Ave**

City **Woodstock** State **VA** Zip Code **22664-1133**

FEC ID number of contributing federal political committee. **C**

Name of Employer **retired** Occupation **retired**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt **07 / 27 / 2009**

**Transaction ID: SA11AI.15034**

Amount of Each Receipt this Period **50.00**

**B.** Full Name (Last, First, Middle Initial)  
Mr Carlyle N Montanye, Jr

Mailing Address **P O Box 14**

City **Glyndon** State **MD** Zip Code **21071**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Real Estate** Occupation **Self Employed**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **07 / 22 / 2009**

**Transaction ID: SA11AI.14908**

Amount of Each Receipt this Period **200.00**

**C.** Full Name (Last, First, Middle Initial)  
Mr George Neall, II

Mailing Address **5452 Tates Bank Rd**

City **Cambridge** State **MD** Zip Code **21613**

FEC ID number of contributing federal political committee. **C**

Name of Employer **retired** Occupation **retired**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2400.00**

Date of Receipt **07 / 15 / 2009**

**Transaction ID: SA11AI.14618**

Amount of Each Receipt this Period **1000.00**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1250.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 24  
(check only one)

<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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
**HOUSE CONSERVATIVES FUND**

**A.**

Full Name (Last, First, Middle Initial)  
Mr Lou Potempa

Mailing Address 140 Marseille

City State Zip Code  
**Montgomery TX 77356-8623**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
retired retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
MM / DD / YYYY  
**07 / 29 / 2009**

**Transaction ID: SA11AI.15110**

Amount of Each Receipt this Period  
**50.00**

**B.**

Full Name (Last, First, Middle Initial)  
Ms Claire Rains

Mailing Address 420 41st Ave

City State Zip Code  
**San Francisco CA 94121-1512**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
information requested information requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **215.00**

Date of Receipt  
MM / DD / YYYY  
**07 / 15 / 2009**

**Transaction ID: SA11AI.14662**

Amount of Each Receipt this Period  
**50.00**

**C.**

Full Name (Last, First, Middle Initial)  
Mr Lunsford Richardson, Jr

Mailing Address 6 Butler St

City State Zip Code  
**Norwalk CT 06850**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
information requested information requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **2000.00**

Date of Receipt  
MM / DD / YYYY  
**07 / 15 / 2009**

**Transaction ID: SA11AI.14552**

Amount of Each Receipt this Period  
**1000.00**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1100.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 24

(check only one)

<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

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NAME OF COMMITTEE (In Full)  
HOUSE CONSERVATIVES FUND

**A.**

Full Name (Last, First, Middle Initial)

Mr Raymond A Rowe

Mailing Address 49 Est E St

City State Zip Code  
Encinitas CA 92024

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
retired retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 20 / 2009

Transaction ID: SA11AI.14673

Amount of Each Receipt this Period  
50.00

**B.**

Full Name (Last, First, Middle Initial)

Mr Harry Schumacher

Mailing Address 47 E 88th St

City State Zip Code  
New York NY 10128-1152

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
retired retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 06 / 2009

Transaction ID: SA11AI.14281

Amount of Each Receipt this Period  
25.00

**C.**

Full Name (Last, First, Middle Initial)

Mr Harry Schumacher

Mailing Address 47 E 88th St

City State Zip Code  
New York NY 10128-1152

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
retired retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 235.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 20 / 2009

Transaction ID: SA11AI.14847

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ►

100.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 24  
(check only one)

<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

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NAME OF COMMITTEE (In Full)  
HOUSE CONSERVATIVES FUND

**A.**

Full Name (Last, First, Middle Initial)  
Mr John J Shaugnessy

Mailing Address 91 Longmeadow Rd

City State Zip Code  
Milton MA 02186-3720

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
07 / 15 / 2009

Transaction ID: SA11AI.14510

Amount of Each Receipt this Period  
100.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr Ira Silverman

Mailing Address 45 B Jefferson

City State Zip Code  
Yorktown Heights NY 10598

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
07 / 15 / 2009

Transaction ID: SA11AI.14658

Amount of Each Receipt this Period  
80.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr Allen H Simon

Mailing Address 1383 N Criss St

City State Zip Code  
Chandler AZ 85226-1307

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
MM / DD / YYYY  
07 / 20 / 2009

Transaction ID: SA11AI.14746

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **380.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 24

(check only one)

<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

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NAME OF COMMITTEE (In Full)  
HOUSE CONSERVATIVES FUND

**A.**

Full Name (Last, First, Middle Initial)

Mr William P Smallwood, Jr

Mailing Address PO Box 906654

City State Zip Code  
San Juan PR 00906

FEC ID number of contributing federal political committee. **C**

Name of Employer information requested Occupation information requested

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 15 / 2009

Transaction ID: SA11AI.14569

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

Mrs John B Strassenburgh

Mailing Address PO Box 608

City State Zip Code  
Ocean View NJ 08230

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 08 / 2009

Transaction ID: SA11AI.14359

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Mr Robert Sunderland

Mailing Address 953 Pyrite Ave

City State Zip Code  
Henderson NV 89011

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 850.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 15 / 2009

Transaction ID: SA11AI.14541

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶

450.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 24  
(check only one)

<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
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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)  
HOUSE CONSERVATIVES FUND

**A.**

Full Name (Last, First, Middle Initial)  
C I Symsmith

Mailing Address 485 Devon Park Drste 119

City State Zip Code  
Wayne PA 19087

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Mgt , Consult Self

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 345.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 08 / 2009

Transaction ID: SA11AI.14389

Amount of Each Receipt this Period  
58.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr Elmer Whitbeck

Mailing Address 420 Lavender Ln

City State Zip Code  
Virginia Beach VA 23462-5515

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
information requested information requested

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 15 / 2009

Transaction ID: SA11AI.14547

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	358.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	7288.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 24  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

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NAME OF COMMITTEE (In Full)  
**HOUSE CONSERVATIVES FUND**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)**

Mailing Address **1120 Connecticut Avenue NW  
Suite 600**

City **Washington** State **DC** Zip Code **20036**

FEC ID number of contributing federal political committee. **C C00004275**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt **07 / 16 / 2009**

**Transaction ID: SA11C.15198**

Amount of Each Receipt this Period **2500.00**

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN CONSERVATIVE UNION PAC (ACU-PAC)**

Mailing Address **1007 Cameron Street**

City **Alexandria** State **VA** Zip Code **22314**

FEC ID number of contributing federal political committee. **C C00130658**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2000.00**

Date of Receipt **07 / 16 / 2009**

**Transaction ID: SA11C.15197**

Amount of Each Receipt this Period **1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN INSURANCE ASSOC PAC (AIA Federal PAC)**

Mailing Address **2101 L Street, NW  
Suite 400**

City **Washington** State **DC** Zip Code **20037**

FEC ID number of contributing federal political committee. **C C00103143**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **07 / 08 / 2009**

**Transaction ID: SA11C.15219**

Amount of Each Receipt this Period **1000.00**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **4500.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 24  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

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NAME OF COMMITTEE (In Full)  
HOUSE CONSERVATIVES FUND

**A.** Full Name (Last, First, Middle Initial)  
ASSOCIATED BUILDERS AND CONTRACTORS PAC

Mailing Address 1300 NORTH 17TH STREET SUITE 800

City State Zip Code  
ROSSLYN VA 22209

FEC ID number of contributing federal political committee. **C** C70003355

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
07 / 13 / 2009

Transaction ID: SA11C.15215

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
BURLINGTON NORTHERN SANTA FE CORP RAILPAC (BNSF RAILPAC)

Mailing Address P.O. Box 961039  
Suite 220

City State Zip Code  
Fort Worth TX 76161

FEC ID number of contributing federal political committee. **C** C00235739

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2009

Transaction ID: SA11C.15217

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC. PAC (INSURPAC)

Mailing Address 412 First Street, SE, Suite 300

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00022343

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
MM / DD / YYYY  
07 / 29 / 2009

Transaction ID: SA11C.15199

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 7000.00

**TOTAL** This Period (last page this line number only) ..... ► 11500.00

**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 18 / 24

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
HOUSE CONSERVATIVES FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Active Engagement	Transaction ID: SB21B.15226 Date of Disbursement MM / DD / YYYY 07 / 02 / 2009
	Mailing Address 44084 Riverside Parkway Suite 350 City Landsdowne State VA Zip Code 20176 Purpose of Disbursement HCF website development Candidate Name Category/Type: 003
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 5000.00

<b>B.</b> Full Name (Last, First, Middle Initial) Advanced Mailing Services	Transaction ID: SB21B.15228 Date of Disbursement MM / DD / YYYY 07 / 02 / 2009
	Mailing Address 14970 Farm Creek Drive City Woodbridge State VA Zip Code 22191 Purpose of Disbursement HCF direct mail - postage Candidate Name Category/Type: 003
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 5622.82

<b>C.</b> Full Name (Last, First, Middle Initial) Advanced Mailing Services	Transaction ID: SB21B.15211 Date of Disbursement MM / DD / YYYY 07 / 16 / 2009
	Mailing Address 14970 Farm Creek Drive City Woodbridge State VA Zip Code 22191 Purpose of Disbursement HCF direct mail - postage Candidate Name Category/Type: 003
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 2675.81

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	13298.63
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**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 19 / 24

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
HOUSE CONSERVATIVES FUND

A.	Full Name (Last, First, Middle Initial) American Caging Inc.	Transaction ID: SB21B.15229 Date of Disbursement
	Mailing Address 4850 Wright Road #168	<input type="text" value="07"/> <input type="text" value="02"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Stafford State TX Zip Code 77477	Amount of Each Disbursement this Period
	Purpose of Disbursement HCF direct mail processing fees Candidate Name	<input type="text" value="732.67"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="003"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) American Caging Inc.	Transaction ID: SB21B.15212 Date of Disbursement
	Mailing Address 4850 Wright Road #168	<input type="text" value="07"/> <input type="text" value="16"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Stafford State TX Zip Code 77477	Amount of Each Disbursement this Period
	Purpose of Disbursement HCF direct mail processing fees Candidate Name	<input type="text" value="487.77"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="003"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Art and Soul	Transaction ID: SB21B.15334 Date of Disbursement
	Mailing Address 415 New Jersey Avenue, NW	<input type="text" value="07"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Washington State DC Zip Code 20001	Amount of Each Disbursement this Period
	Purpose of Disbursement HCF fundraising dinner - food & beverages Candidate Name	<input type="text" value="2752.10"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="003"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1220.44"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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 20 / 24

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
HOUSE CONSERVATIVES FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Cafe Phillips Mailing Address 50 F Street, NW City Washington State DC Zip Code 20001 Purpose of Disbursement HCF lunch event - food expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.15333 Date of Disbursement 07 / 09 / 2009 Amount of Each Disbursement this Period 404.95 [MEMO ITEM]
	Category/ Type 003	

<b>B.</b> Full Name (Last, First, Middle Initial) Campaign Solutions Mailing Address 118 N St. Asaph Street City Alexandria State VA Zip Code 22314 Purpose of Disbursement HCF online fundraising Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.15221 Date of Disbursement 07 / 31 / 2009 Amount of Each Disbursement this Period 375.70
	Category/ Type 003	

<b>C.</b> Full Name (Last, First, Middle Initial) Campaign Solutions Mailing Address 118 N St. Asaph Street City Alexandria State VA Zip Code 22314 Purpose of Disbursement HCF online web hosting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.15222 Date of Disbursement 07 / 31 / 2009 Amount of Each Disbursement this Period 25.00
	Category/ Type 003	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	400.70
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# 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 21 / 24

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
HOUSE CONSERVATIVES FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Campaign Solutions Mailing Address 118 N St. Asaph Street City Alexandria State VA Zip Code 22314 Purpose of Disbursement HCF credit card fees - online fundraising Candidate Name	Transaction ID: SB21B.15225 Date of Disbursement 07 / 31 / 2009
	Amount of Each Disbursement this Period 94.61
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 003

<b>B.</b> Full Name (Last, First, Middle Initial) InService America Mailing Address 129 Vista Centre Drive City Forest State VA Zip Code 24551 Purpose of Disbursement HCF telemarketing/web fundraising Candidate Name	Transaction ID: SB21B.15206 Date of Disbursement 07 / 16 / 2009
	Amount of Each Disbursement this Period 3202.69
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

<b>C.</b> Full Name (Last, First, Middle Initial) Integram Mailing Address 8421 Hilltop Road City Fairfax State VA Zip Code 22031 Purpose of Disbursement HCF direct mail - postage Candidate Name	Transaction ID: SB21B.15209 Date of Disbursement 07 / 16 / 2009
	Amount of Each Disbursement this Period 9471.27
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 003

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

12768.57

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

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
HOUSE CONSERVATIVES FUND

A.	Full Name (Last, First, Middle Initial) Bill Oorbeek	Transaction ID: SB21B.15233 Date of Disbursement
	Mailing Address 2101 Wilson Blvd	<input type="text" value="07"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City Arlington State VA Zip Code 22201	Amount of Each Disbursement this Period
	Purpose of Disbursement HCF dinner reimbursement - see Sonoma Rest. memo item	<input type="text" value="2699.90"/>
	Candidate Name	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Bill Oorbeek	Transaction ID: SB21B.15208 Date of Disbursement
	Mailing Address 2101 Wilson Blvd	<input type="text" value="07"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City Arlington State VA Zip Code 22201	Amount of Each Disbursement this Period
	Purpose of Disbursement HCF event reimbursement - see Art and Soul memo item	<input type="text" value="2752.10"/>
	Candidate Name	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Bill Oorbeek	Transaction ID: SB21B.15204 Date of Disbursement
	Mailing Address 2101 Wilson Blvd	<input type="text" value="07"/> / <input type="text" value="29"/> / <input type="text" value="2009"/>
	City Arlington State VA Zip Code 22201	Amount of Each Disbursement this Period
	Purpose of Disbursement HCF lunch reimbursement -see Cafe Phillips memo item	<input type="text" value="404.95"/>
	Candidate Name	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="5856.95"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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 23 / 24

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
HOUSE CONSERVATIVES FUND

A.	Full Name (Last, First, Middle Initial) Patton Boggs LLP	Transaction ID: SB21B.15231 Date of Disbursement
	Mailing Address 2550 M Street, NW	<input type="text" value="07"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20037	Amount of Each Disbursement this Period
	Purpose of Disbursement HCF legal fees	<input type="text" value="663.75"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Sederholm Public Affairs, Inc.	Transaction ID: SB21B.15201 Date of Disbursement
	Mailing Address 675 N Washington Street Suite 410	<input type="text" value="07"/> / <input type="text" value="29"/> / <input type="text" value="2009"/>
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement HCF Management/Admin Fees	<input type="text" value="1000.00"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Sonoma Restaurant & Wine Bar	Transaction ID: SB21B.15336 Date of Disbursement
	Mailing Address Pennsylvania Avenue, SE	<input type="text" value="07"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement HCF fundraising dinner - food & beverage expenses	<input type="text" value="2699.90"/>
	Candidate Name	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1663.75"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# 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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
HOUSE CONSERVATIVES FUND

A.	Full Name (Last, First, Middle Initial) The Oorbeek Group  Mailing Address 3140 W. Ward Road Suite 201  City Dunkirk State MD Zip Code 20754  Purpose of Disbursement HCF political fundraising/consulting Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.15232 Date of Disbursement 07 / 02 / 2009  Amount of Each Disbursement this Period 3250.00  Category/Type 003
B.	Full Name (Last, First, Middle Initial) The Oorbeek Group  Mailing Address 3140 W. Ward Road Suite 201  City Dunkirk State MD Zip Code 20754  Purpose of Disbursement HCF political fundraising/consulting Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.15205 Date of Disbursement 07 / 16 / 2009  Amount of Each Disbursement this Period 10010.00  Category/Type 003
C.	Full Name (Last, First, Middle Initial) Wachovia Bank NA  Mailing Address P.O. Box 563966  City Charlotte State NC Zip Code 28256  Purpose of Disbursement commercial bank service charges Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.15234 Date of Disbursement 07 / 09 / 2009  Amount of Each Disbursement this Period 92.84  Category/Type 001

SUBTOTAL of Disbursements This Page (optional) .....	13352.84
TOTAL This Period (last page this line number only) .....	48561.88