

# 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  
CONSERVATIVE LEADERSHIP POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 3128 N. 17th Street  
Arlington VA 22201  
 Check if different than previously reported. (ACC)

2. **FEC IDENTIFICATION NUMBER** C00010363  
**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 11 07 2006 in the State of \_\_\_\_\_

5. Covering Period 10 19 2006 through 11 27 2006

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 David Fenner

Signature of Treasurer Electronically Filed by David Fenner Date 12 01 2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
CONSERVATIVE LEADERSHIP POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 

M	M
1	0

D	D
1	9

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
1	1

D	D
2	7

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><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>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		38967.98
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	18995.83									
(c) Total Receipts (from Line 19) .....	22315.00	65125.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	41310.83	104092.98								
7. Total Disbursements (from Line 31) .....	5050.02	67832.17								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	36260.81	36260.81								
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**

Write or Type Committee Name  
**CONSERVATIVE LEADERSHIP POLITICAL ACTION COMMITTEE**

Report Covering the Period: From: 

M	M
1	0

D	D
1	9

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
1	1

D	D
2	7

Y	Y	Y	Y
2	0	0	6

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	19200.00	53750.00
(i) Itemized (use Schedule A) .....	3115.00	11375.00
(ii) Unitemized .....	22315.00	65125.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(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) .....	22315.00	65125.00
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 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)) .....	22315.00	65125.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	22315.00	65125.00

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 4

<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.....	4050.02	39331.09
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	4050.02	39331.09
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	6401.08
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 .....	1000.00	1000.00
(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)) .....	1000.00	1000.00
29. Other Disbursements.....	0.00	21100.00
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))..	5050.02	67832.17
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	5050.02	67832.17

**DETAILED SUMMARY PAGE**  
of Disbursements

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) .....	22315.00	65125.00
34. Total Contribution Refunds (from Line 28(d)) .....	1000.00	1000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	21315.00	64125.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	4050.02	39331.09
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	4050.02	39331.09

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 17
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**CONSERVATIVE LEADERSHIP POLITICAL ACTION COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. & Mrs. Edward W. Asplin		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 4770 Bayswater Road		<b>Transaction ID:</b> SA11A1.6254
City State Zip Code Excelsior MN 55331-9279	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Homemaker	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. JeffsG Beede		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address 19 Clemmons Street		<b>Transaction ID:</b> SA11A1.6236
City State Zip Code Southborough MA 01772-1315	Amount of Each Receipt this Period 1500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired	Aggregate Year-to-Date ▼ 1500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Art W. Boroughs		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6
Mailing Address P.O. Box 207		<b>Transaction ID:</b> SA11A1.6193
City State Zip Code Paxton IN 47865-0207	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Self Farmer	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 17
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**CONSERVATIVE LEADERSHIP POLITICAL ACTION COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. William W, Boyd		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6	
Mailing Address P.O. Box 1147		<b>Transaction ID:</b> SA11A1.6240	
City Tallahassee	State FL	Amount of Each Receipt this Period 250.00	
Zip Code 32302-1147			
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Mechanical Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. WalterJ Dodel		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6	
Mailing Address 238 S. Erie Avenue		<b>Transaction ID:</b> SA11A1.6214	
City Lindenhurst	State NY	Amount of Each Receipt this Period 200.00	
Zip Code 11757-5101			
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Dr. & Mrs. Brian E. Gordon		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6	
Mailing Address 1212 NW 12th Street		<b>Transaction ID:</b> SA11A1.6225	
City Andrews	State TX	Amount of Each Receipt this Period 250.00	
Zip Code 79714			
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation General Surgeon		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	700.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 17
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**CONSERVATIVE LEADERSHIP POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Alex T. Hunt</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6	
Mailing Address PO Box 1247		<b>Transaction ID: SA11A1.6204</b>	
City <b>Ruston</b>	State <b>LA</b>	Zip Code <b>71273-1247</b>	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Hunt Forest Products, Inn.	Occupation Chairman		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Eliot H. Jenkins</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6	
Mailing Address 13169 SE River Road Apt. 307T		<b>Transaction ID: SA11A1.6219</b>	
City <b>Portland</b>	State <b>OR</b>	Zip Code <b>97222-9789</b>	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		

Full Name (Last, First, Middle Initial) <b>C. Richard Jowitt</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6	
Mailing Address 1928 Princess Court		<b>Transaction ID: SA11A1.6210</b>	
City <b>Naples</b>	State <b>FL</b>	Zip Code <b>34110-1017</b>	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	600.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 17
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CONSERVATIVE LEADERSHIP POLITICAL ACTION COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
 Mr. WarrenG Keinath, Jr.  
 Mailing Address 12342 Creekhaven Drive  
 City State Zip Code  
 Saint Louis MO 63131-3825  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 3 1 / 2 0 0 6  
**Transaction ID:** SA11A1.6201  
 Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
 Mr. Robert D.C. Long  
 Mailing Address 47 Savannah Trail  
 City State Zip Code  
 Hilton Head SC 29926-2693  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 3 1 / 2 0 0 6  
**Transaction ID:** SA11A1.6243  
 Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
 Perrin March, II  
 Mailing Address 7 Grandlin Place  
 City State Zip Code  
 Cincinnati OH 45208  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Cincinnati Incorporated Manufacturing  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 3 1 / 2 0 0 6  
**Transaction ID:** SA11A1.6238  
 Amount of Each Receipt this Period  
 2000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 17
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**CONSERVATIVE LEADERSHIP POLITICAL ACTION COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Richard C. Marx		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address P.O. Box 440		<b>Transaction ID:</b> SA11A1.6241
City State Zip Code Wappingers Falls NY 12590-0440	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self Occupation Insurance		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Roy Maxson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address 5785 E 500 S		<b>Transaction ID:</b> SA11A1.6235
City State Zip Code Whitestown IN 46075-9566	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>C.</b> Full Name (Last, First, Middle Initial) E. Leslie McClelland		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address P.O. Box 310		<b>Transaction ID:</b> SA11A1.6232
City State Zip Code Lancaster OH 43130	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Cyril Scott Company Occupation Office worker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5700.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 17
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**CONSERVATIVE LEADERSHIP POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Jack A. Mullins</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address 224 Ridgewood Drive		<b>Transaction ID: SA11A1.6249</b>
City State Zip Code Victoria TX 77901-2572	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. Francis P. Murphy</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 0 / 2 0 0 6
Mailing Address 2720 Green Tee Drive		<b>Transaction ID: SA11A1.6257</b>
City State Zip Code Pearland TX 77581	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Tomato Grower/Shipper Aggregate Year-to-Date ▼ 6000.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. John Nelson</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address 1620 S. Ocean Blvd. Apt. 11-A		<b>Transaction ID: SA11A1.6206</b>
City State Zip Code Pompano Beach FL 33062-7704	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5200.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 17
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**CONSERVATIVE LEADERSHIP POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Nicholas Peay, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 6	
Mailing Address 2965 Fairmount Blvd.		<b>Transaction ID: SA11A1.6248</b>	
City Cleveland Heights	State OH	Zip Code 44118-4060	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Private Investor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B. Mrs. Edward J. Regard</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 720 E. Cherry Lane		<b>Transaction ID: SA11A1.6251</b>	
City Arlington Heights	State IL	Zip Code 60004-3217	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Ms. Lee Shannon</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6	
Mailing Address 997 Bayside Cove West		<b>Transaction ID: SA11A1.6253</b>	
City Newport Beach	State CA	Zip Code 92660	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 17
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**CONSERVATIVE LEADERSHIP POLITICAL ACTION COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
 Mr. T. Grange Simons

Mailing Address 223 Bennett Street

City State Zip Code  
 Mt. Pleasant SC 29464

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

Name of Employer 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 Y  
 1 0 / 3 1 / 2 0 0 6

**Transaction ID:** SA11A1.6245

Amount of Each Receipt this Period  
 100.00

**B.** Full Name (Last, First, Middle Initial)  
 Mr. BakerA. Smith

Mailing Address 3360 E Terrell Branch C

City State Zip Code  
 Marietta GA 30067-5164

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

Name of Employer Occupation  
 Morris-Anderson & Assoc Management Co

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 3 1 / 2 0 0 6

**Transaction ID:** SA11A1.6203

Amount of Each Receipt this Period  
 100.00

**C.** Full Name (Last, First, Middle Initial)  
 Gary L. Swenson

Mailing Address 36 Game Cock Road

City State Zip Code  
 Greenwich CT 06830

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

Name of Employer Occupation  
 Windward Capital Partners

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 1 / 2 0 / 2 0 0 6

**Transaction ID:** SA11A1.6261

Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>450.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 14 / 17
	(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)  
**CONSERVATIVE LEADERSHIP POLITICAL ACTION COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
 Lt. Col. William R. Vivian

Mailing Address 36 Inglewood Drive

City State Zip Code  
 Hampton VA 23666-3554

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

Name of Employer Occupation  
 Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
 600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 3 1 / 2 0 0 6

**Transaction ID: SA11A1.6194**

Amount of Each Receipt this Period  
 200.00

**B.** Full Name (Last, First, Middle Initial)  
 Mr. Gordon B. West

Mailing Address P.O. Box 138

City State Zip Code  
 Rancho Santa Fe CA 92067-0138

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

Name of Employer Occupation  
 Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 3 1 / 2 0 0 6

**Transaction ID: SA11A1.6231**

Amount of Each Receipt this Period  
 200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>400.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>19200.00</b>

# 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 15 / 17

<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)  
CONSERVATIVE LEADERSHIP POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. LLC Hinkey Company</b>		<b>Transaction ID: SB21B.6269</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6	
Mailing Address 9058 Euclid Avenue		Amount of Each Disbursement this Period 376.02	
City Manassas State VA Zip Code 20110	Purpose of Disbursement Printing and mail shop	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) ▼		

Full Name (Last, First, Middle Initial) <b>B. Stephen Palvisak</b>		<b>Transaction ID: SB21B.6267</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 6	
Mailing Address 5608 Pitch Pine Drive		Amount of Each Disbursement this Period 1500.00	
City Orlando State FL Zip Code 32819	Purpose of Disbursement Prof. Services - Program	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) ▼		

Full Name (Last, First, Middle Initial) <b>C. Stephen Palvisak</b>		<b>Transaction ID: SB21B.6270</b> Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 6	
Mailing Address 5608 Pitch Pine Drive		Amount of Each Disbursement this Period 74.00	
City Orlando State FL Zip Code 32819	Purpose of Disbursement Reim. travel expenses	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) ..... ▶	1950.02
<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 16 / 17

<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)  
CONSERVATIVE LEADERSHIP POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Stephen Palvisak</b>		<b>Transaction ID: SB21B.6268</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 6
Mailing Address 5608 Pitch Pine Drive		Amount of Each Disbursement this Period 1500.00
City Orlando State FL Zip Code 32819	Purpose of Disbursement Prof. Services - Program 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) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Stephen Palvisak</b>		<b>Transaction ID: SB21B.6271</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 6
Mailing Address 5608 Pitch Pine Drive		Amount of Each Disbursement this Period 600.00
City Orlando State FL Zip Code 32819	Purpose of Disbursement Prof. Services - Program 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) ▼	Category/ Type

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

2100.00

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

4050.02



**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 17 / 17

<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 checked="" 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 LEADERSHIP POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Mr. Francis P. Murphy</b>		Transaction ID: SB28A.6272																					
Mailing Address 2720 Green Tee Drive		Date of Disbursement																					
City Pearlland State TX Zip Code 77581		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>2</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	2	7	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	1	/	2	7	/	2	0	0	6														
Purpose of Disbursement Refund excess contribution		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td>1000.00</td> </tr> </table>		1000.00																			
1000.00																							
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) ▼	Category/ Type																					
State: District:																							

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	1000.00