

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 Order for Good Government

ADDRESS (number and street) 330 Encinitas Blvd., Suite 101 Encinitas CA 92024

2. FEC IDENTIFICATION NUMBER C00138107 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, 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 (12G) (d) 30-Day Post -Election Report for the: General (30G), Runoff (30R), Special (30S)

5. Covering Period 01 01 2009 through 06 30 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 Beth Reno Signature of Treasurer Electronically Filed by Beth Reno Date 08 10 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 FEC FORM 3X (Rev. 12/2004)

A. Form/Schedule : **F3XA**

Amend to add debt to Schedule D.

Transaction ID :

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Conservative Order for Good Government

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	6

D	D
3	0

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		6504.31
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	6504.31									
(c) Total Receipts (from Line 19)	8915.00	8915.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	15419.31	15419.31								
7. Total Disbursements (from Line 31)	12237.63	12237.63								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	3181.68	3181.68								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	3901.20									

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
Conservative Order for Good Government

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	6

D	D
3	0

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)	2660.00	2660.00
(ii) Unitemized	6255.00	6255.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	8915.00	8915.00
(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)	8915.00	8915.00
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))	8915.00	8915.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	8915.00	8915.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
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.....	11987.63	11987.63
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	11987.63	11987.63
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	250.00	250.00
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	0.00
(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	0.00
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))..	12237.63	12237.63
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12237.63	12237.63

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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	8915.00	8915.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	8915.00	8915.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	11987.63	11987.63
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	11987.63	11987.63

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

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

FOR LINE NUMBER: PAGE 7 / 22
(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 Order for Good Government

A. Full Name (Last, First, Middle Initial)
Albert 'Cub' Beard

Mailing Address 18404 Starvation Mtn. Road

City Escondido State CA Zip Code 92025

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

Name of Employer N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 06 / 16 / 2009
Transaction ID: INC.A.2251
 Amount of Each Receipt this Period: 300.00

B. Full Name (Last, First, Middle Initial)
Elmer W. Getz

Mailing Address 17161 Alva Road #1622

City San Diego State CA Zip Code 92127

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

Name of Employer N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 01 / 08 / 2009
Transaction ID: INC.A.2153
 Amount of Each Receipt this Period: 150.00

C. Full Name (Last, First, Middle Initial)
Elmer W. Getz

Mailing Address 17161 Alva Road #1622

City San Diego State CA Zip Code 92127

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

Name of Employer N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 06 / 03 / 2009
Transaction ID: INC.A.2230
 Amount of Each Receipt this Period: 150.00

SUBTOTAL of Receipts This Page (optional) ► 600.00

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 / 22
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Conservative Order for Good Government

<p>A. Full Name (Last, First, Middle Initial) Ralph B. Grah</p> <p>Mailing Address 18655 West Bernardo Drive, #383</p> <p>City State Zip Code San Diego CA 92127</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer N/A Occupation Retired</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 300.00</p>	<p>Date of Receipt 01 / 08 / 2009</p> <p>Transaction ID: INC.A.2155</p> <p>Amount of Each Receipt this Period 150.00</p>
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<p>B. Full Name (Last, First, Middle Initial) Ralph B. Grah</p> <p>Mailing Address 18655 West Bernardo Drive, #383</p> <p>City State Zip Code San Diego CA 92127</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer N/A Occupation Retired</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 300.00</p>	<p>Date of Receipt 06 / 04 / 2009</p> <p>Transaction ID: INC.A.2235</p> <p>Amount of Each Receipt this Period 150.00</p>
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<p>C. Full Name (Last, First, Middle Initial) Shirle M. Johnson</p> <p>Mailing Address 12284 Fairway Pointe Row</p> <p>City State Zip Code San Diego CA 92128</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer N/A Occupation Homemaker</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 300.00</p>	<p>Date of Receipt 06 / 09 / 2009</p> <p>Transaction ID: INC.A.2243</p> <p>Amount of Each Receipt this Period 300.00</p>
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SUBTOTAL of Receipts This Page (optional)	600.00
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: (check only one)	PAGE 9 / 22
	<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 Order for Good Government

A.	Full Name (Last, First, Middle Initial) Martin Judge	Date of Receipt MM / DD / YYYY 02 / 19 / 2009
	Mailing Address 11519 Caminito Corriente	Transaction ID: INC.A.2169
	City State Zip Code San Diego CA 92128	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Dolphin Communications Occupation Marketing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) Martin Judge	Date of Receipt MM / DD / YYYY 06 / 04 / 2009
	Mailing Address 11519 Caminito Corriente	Transaction ID: INC.A.2238
	City State Zip Code San Diego CA 92128	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Dolphin Communications Occupation Marketing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) D. Blair Lawson	Date of Receipt MM / DD / YYYY 01 / 31 / 2009
	Mailing Address 12208 Rios Rd	Transaction ID: INC.A.2162
	City State Zip Code San Diego CA 92128	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer LIS Associates Occupation Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

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 10 / 22
(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)
Conservative Order for Good Government

A.

Full Name (Last, First, Middle Initial)
D. Blair Lawson

Mailing Address 12208 Rios Rd

City San Diego State CA Zip Code 92128

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

Name of Employer LIS Associates Occupation Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
05 / 28 / 2009

Transaction ID: INC.A.2212

Amount of Each Receipt this Period
150.00

B.

Full Name (Last, First, Middle Initial)
Don Norris

Mailing Address 12135 Royal Lytham Row

City San Diego State CA Zip Code 92128

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

Name of Employer N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
MM / DD / YYYY
04 / 30 / 2009

Transaction ID: INC.A.2208

Amount of Each Receipt this Period
185.00

C.

Full Name (Last, First, Middle Initial)
Don Norris

Mailing Address 12135 Royal Lytham Row

City San Diego State CA Zip Code 92128

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

Name of Employer N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
MM / DD / YYYY
06 / 25 / 2009

Transaction ID: INC.A.2260

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional) ▶ **410.00**

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 / 22
	(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 Order for Good Government

A.

Full Name (Last, First, Middle Initial) Glenn Robertson		Date of Receipt MM / DD / YYYY 06 / 15 / 2009
Mailing Address 12290 Fairway Pointe Row		Transaction ID: INC.A.2248
City San Diego	State CA	Zip Code 92128
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer N/A	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.

Full Name (Last, First, Middle Initial) Hal K. St. Clair		Date of Receipt MM / DD / YYYY 01 / 08 / 2009
Mailing Address 17187 Prado Place		Transaction ID: INC.A.2154
City San Diego	State CA	Zip Code 92128
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer N/A	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	▶	600.00
TOTAL This Period (last page this line number only)	▶	2660.00

**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)

<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 Order for Good Government

A.	Full Name (Last, First, Middle Initial) Martin Judge	Transaction ID: EXP.B.2174 Date of Disbursement
	Mailing Address 11519 Caminito Corriente	<input type="text" value="02"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City San Diego State CA Zip Code 92128	Amount of Each Disbursement this Period
	Purpose of Disbursement Membership Luncheon, Copies Candidate Name	<input type="text" value="1557.83"/>
	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) ▼
		<input type="text" value="001"/> Category/Type

B.	Full Name (Last, First, Middle Initial) Holiday Inn Select - Miramar San Diego	Transaction ID: EDT.B.2 Date of Disbursement
	Mailing Address 9335 Kearny Mesa Road	<input type="text" value="02"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City San Diego State CA Zip Code 92126	Amount of Each Disbursement this Period
	Purpose of Disbursement Membership Luncheon Candidate Name	<input type="text" value="1547.72"/>
	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) ▼
		<input type="text" value="001"/> Category/Type

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Legend Editions	Transaction ID: EXP.B.2165 Date of Disbursement
	Mailing Address 16868 Alondra Drive	<input type="text" value="01"/> <input type="text" value="31"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City San Diego State CA Zip Code 92128	Amount of Each Disbursement this Period
	Purpose of Disbursement Member Newsletter Candidate Name	<input type="text" value="150.00"/>
	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) ▼
		<input type="text" value="001"/> Category/Type

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1707.83"/>
TOTAL 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)
Conservative Order for Good Government

A. Full Name (Last, First, Middle Initial) Legend Editions Mailing Address 16868 Alondra Drive City San Diego State CA Zip Code 92128 Purpose of Disbursement Member Newsletter Candidate Name	Transaction ID: EXP.B.2176 Date of Disbursement MM / DD / YYYY 02 / 26 / 2009
	Amount of Each Disbursement this Period 210.00
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 001

B. Full Name (Last, First, Middle Initial) Legend Editions Mailing Address 16868 Alondra Drive City San Diego State CA Zip Code 92128 Purpose of Disbursement Member Newsletter Candidate Name	Transaction ID: EXP.B.2177 Date of Disbursement MM / DD / YYYY 03 / 30 / 2009
	Amount of Each Disbursement this Period 170.00
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 001

C. Full Name (Last, First, Middle Initial) Legend Editions Mailing Address 16868 Alondra Drive City San Diego State CA Zip Code 92128 Purpose of Disbursement Member Newsletter Candidate Name	Transaction ID: EXP.B.2206 Date of Disbursement MM / DD / YYYY 04 / 30 / 2009
	Amount of Each Disbursement this Period 150.00
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 001

SUBTOTAL of Disbursements This Page (optional) ► **530.00**

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)
Conservative Order for Good Government

A.	Full Name (Last, First, Middle Initial) Legend Editions	Transaction ID: EXP.B.2253 Date of Disbursement MM / DD / YYYY 06 / 22 / 2009
	Mailing Address 16868 Alondra Drive	Amount of Each Disbursement this Period 170.00
	City San Diego State CA Zip Code 92128	
	Purpose of Disbursement Member Newsletter Candidate Name	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) Rancho Bernardo Inn	Transaction ID: EXP.B.2167 Date of Disbursement MM / DD / YYYY 01 / 31 / 2009
	Mailing Address 17550 Bernardo Oaks Drive	Amount of Each Disbursement this Period 876.65
	City San Diego State CA Zip Code 92128	
	Purpose of Disbursement Membership Luncheon Candidate Name	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) Rancho Bernardo Inn	Transaction ID: EXP.B.2172 Date of Disbursement MM / DD / YYYY 02 / 26 / 2009
	Mailing Address 17550 Bernardo Oaks Drive	Amount of Each Disbursement this Period 1120.60
	City San Diego State CA Zip Code 92128	
	Purpose of Disbursement Membership Luncheon Candidate Name	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) ▼

SUBTOTAL of Disbursements This Page (optional)	2167.25
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

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 Order for Good Government

A.	Full Name (Last, First, Middle Initial) Rancho Bernardo Inn	Transaction ID: EXP.B.2180 Date of Disbursement
	Mailing Address 17550 Bernardo Oaks Drive	<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City San Diego State CA Zip Code 92128	Amount of Each Disbursement this Period
	Purpose of Disbursement Membership Luncheon Candidate Name	<input type="text" value="1258.09"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	001 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Rancho Bernardo Inn	Transaction ID: EXP.B.2207 Date of Disbursement
	Mailing Address 17550 Bernardo Oaks Drive	<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City San Diego State CA Zip Code 92128	Amount of Each Disbursement this Period
	Purpose of Disbursement Membership Luncheon Candidate Name	<input type="text" value="1452.26"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	001 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Rancho Bernardo Inn	Transaction ID: EXP.B.2255 Date of Disbursement
	Mailing Address 17550 Bernardo Oaks Drive	<input type="text" value="06"/> / <input type="text" value="22"/> / <input type="text" value="2009"/>
	City San Diego State CA Zip Code 92128	Amount of Each Disbursement this Period
	Purpose of Disbursement Membership Luncheon Candidate Name	<input type="text" value="837.34"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	001 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3547.69"/>
TOTAL 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)

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<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 Order for Good Government

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Scott & Cronin LLP</p> <p>Mailing Address 330 Encinitas Blvd., Suite 101</p> <p>City Encinitas State CA Zip Code 92024</p> <p>Purpose of Disbursement Accounting and administrative services.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: EXP.B.2272</p> <p>Date of Disbursement 01 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 549.56</p> <p>001 Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Scott & Cronin LLP</p> <p>Mailing Address 330 Encinitas Blvd., Suite 101</p> <p>City Encinitas State CA Zip Code 92024</p> <p>Purpose of Disbursement Accounting and administrative services.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: EXP.B.2175</p> <p>Date of Disbursement 02 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 1116.97</p> <p>001 Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Scott & Cronin LLP</p> <p>Mailing Address 330 Encinitas Blvd., Suite 101</p> <p>City Encinitas State CA Zip Code 92024</p> <p>Purpose of Disbursement Accounting and administrative services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: EXP.B.2179</p> <p>Date of Disbursement 03 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 561.74</p> <p>001 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2228.27

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)

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<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 Order for Good Government

A. Full Name (Last, First, Middle Initial) Scott & Cronin LLP <hr/> Mailing Address 330 Encinitas Blvd., Suite 101 <hr/> City Encinitas State CA Zip Code 92024 <hr/> Purpose of Disbursement Accounting and administrative services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: EXP.B.2210 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 8 / 2 0 0 9
	Amount of Each Disbursement this Period 584.00 Category/Type: 001
B. Full Name (Last, First, Middle Initial) Scott & Cronin LLP <hr/> Mailing Address 330 Encinitas Blvd., Suite 101 <hr/> City Encinitas State CA Zip Code 92024 <hr/> Purpose of Disbursement Accounting and administrative services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: EXP.B.2252 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 9
	Amount of Each Disbursement this Period 1084.70 Category/Type: 001

SUBTOTAL of Disbursements This Page (optional)	▶	1668.70
TOTAL This Period (last page this line number only)	▶	11849.74

**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)

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<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 Order for Good Government

A.

Full Name (Last, First, Middle Initial)
Brian Bilbray for Congress

Transaction ID: EXP.B.2209

Date of Disbursement

Mailing Address 2466 Unicornio Street

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	6		2	0	0	9

City State Zip Code
Carlsbad CA 92009

Amount of Each Disbursement this Period

250.00

Purpose of Disbursement
Contribution

011
Category/ Type

Candidate Name
Brian Bilbray

Office Sought: House
 Senate
 President
State: CA District: 50

Disbursement For: 2010
 Primary General
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ►

250.00

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

250.00

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 Order for Good Government

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Answer California			Nature of Debt (Purpose): Voice mail message center
Mailing Address 181 Rea Avenue, Suite 201			
City El Cajon	State CA	ZIP Code 92020	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: PAY:D:2310	
Amount Incurred This Period <input type="text" value="22.21"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="22.21"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Answer California			Nature of Debt (Purpose): Voice mail message center
Mailing Address 181 Rea Avenue, Suite 201			
City El Cajon	State CA	ZIP Code 92020	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: PAY:D:2311	
Amount Incurred This Period <input type="text" value="28.99"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="28.99"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor D. Blair Lawson			Nature of Debt (Purpose): Postage/Box Rental
Mailing Address 12208 Rios Rd			
City San Diego	State CA	ZIP Code 92128	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: PAY:D:2270	
Amount Incurred This Period <input type="text" value="63.22"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="63.22"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="114.42"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

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 Order for Good Government

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Legend Editions			Nature of Debt (Purpose): Member Newsletter
Mailing Address 16868 Alondra Drive			
City San Diego	State CA	ZIP Code 92128	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: PAY:D:2269	
Amount Incurred This Period <input type="text" value="150.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="150.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Legend Editions			Nature of Debt (Purpose): Member Newsletter
Mailing Address 16868 Alondra Drive			
City San Diego	State CA	ZIP Code 92128	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: PAY:D:2286	
Amount Incurred This Period <input type="text" value="180.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="180.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Michael Ehrenfeld Co.			Nature of Debt (Purpose): Directors & Officers Ins. Policy
Mailing Address 2655 Camino Del Rio No., # 200			
City San Diego	State CA	ZIP Code 92108	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: PAY:D:2271	
Amount Incurred This Period <input type="text" value="1286.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1286.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="1616.00"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

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 Order for Good Government

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Rancho Bernardo Inn			Nature of Debt (Purpose): Membership Luncheon
Mailing Address 17550 Bernardo Oaks Drive			
City San Diego	State CA	ZIP Code 92128	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: PAY:D:2288	
Amount Incurred This Period <input type="text" value="1088.30"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1088.30"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Scott & Cronin LLP			Nature of Debt (Purpose): Accounting and administrative services.
Mailing Address 330 Encinitas Blvd., Suite 101			
City Encinitas	State CA	ZIP Code 92024	

Outstanding Balance Beginning This Period <input type="text" value="549.56"/>		Transaction ID: PAY:D:2156	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="549.56"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Scott & Cronin LLP			Nature of Debt (Purpose): Accounting and administrative services
Mailing Address 330 Encinitas Blvd., Suite 101			
City Encinitas	State CA	ZIP Code 92024	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: PAY:D:2266	
Amount Incurred This Period <input type="text" value="687.48"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="687.48"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="1775.78"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 22 / 22	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Conservative Order for Good Government

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Spirit of the Fourth, Inc.			Nature of Debt (Purpose): General Membership ad
Mailing Address 11519 Caminito Corriente			
City San Diego	State CA	ZIP Code 92128	

Outstanding Balance Beginning This Period		Transaction ID: PAY:D:2287	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
395.00	0.00	395.00	

1) SUBTOTALS This Period This Page (optional).....	395.00
2) TOTALS This Period (last page this line number only).....	3901.20
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	3901.20