

**FEC
FORM 3X**

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

RECEIVED

2011 OCT 13 AM 9:53

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5EC MAIL CENTER**

CONSERVATIVE NATIONAL COMMITTEE

ADDRESS (number and street) P.O. Box 101326

Check if different than previously reported. (ACC) ARLINGTON VA 22210

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C00139097

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

- Feb 20 (M2)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Oct 20 (M10)
- Aug 20 (M8)
- Sep 20 (M9)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

- Primary (12P)
- General (12G)
- Runoff (12R)
- Convention (12C)
- Special (12S)

Election on MM / DD / YYYY in the State of

(d) 30-Day POST-Election Report for the:

- General (30G)
- Runoff (30R)
- Special (30S)

Election on MM / DD / YYYY in the State of

5. Covering Period 09 / 01 / 2011 through 08 / 30 / 2011

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer RALPH J. GALLIANO

Signature of Treasurer *Ralph J. Galliano* Date 10 / 12 / 2011

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

11030671906

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

CONSERVATIVE NATIONAL COMMITTEE

Report Covering the Period: From:

09 ' 01 ' 2011

To:

09 ' 30 ' 2011

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <u>2011</u>		<u>376340</u>
(b) Cash on Hand at Beginning of Reporting Period.....	<u>518375</u>	
(c) Total Receipts (from Line 19).....	<u>3000-</u>	<u>12750-</u>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<u>818375</u>	<u>1651340</u>
7. Total Disbursements (from Line 31).....	<u>1250-</u>	<u>957965</u>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<u>693375</u>	<u>693375</u>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<u>0</u>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<u>9493082</u>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

11030671907

**DETAILED SUMMARY PAGE
of Receipts**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

CONSERVATIVE NATIONAL COMMITTEE

Report Covering the Period: From:

09 01 2011

To:

09 30 2011

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).....

3,000 -
0
3,000 -

12,500 -
0
12,500 -

(ii) Unitemized.....

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

(b) Political Party Committees.....

(c) Other Political Committees (such as PACs).....

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)..... ▶

3,000 -
0
0
0

12,500 -
0
0
0

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

13. All Loans Received.....

14. Loan Repayments Received.....

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

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

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

18. Transfers from Non-Federal and Levin Funds

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

(b) Levin Funds (from Schedule H5).....

(c) Total Transfers (add 18(a) and 18(b))..

0
0
0
0
0
0

0
0
0
0
0
0

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

3,000 -

12,500 -

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

3,000 -

12,500 -

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**DETAILED SUMMARY PAGE
of Disbursements**

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements

**COLUMN A
Total This Period**

**COLUMN B
Calendar Year-to-Date**

21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share		
(ii) Non-Federal Share		
(b) Other Federal Operating Expenditures		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	750 -	807965
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	500 -	1500 -
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0	0
29. Other Disbursements		
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1250 -	957965
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	1250 -	957965

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**DETAILED SUMMARY PAGE
of Disbursements**

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	3000 -	12500 -
34. Total Contribution Refunds (from Line 28(d))	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3000 -	12500 -
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	750 -	807965
37. Offsets to Operating Expenditures (from Line 15, page 3)	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36)	750 -	807965

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

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

FOR LINE NUMBER:		PAGE	OF
<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	

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

NAME OF COMMITTEE (In Full)

CONSERVATIVE NATIONAL COMMITTEE

Full Name (Last, First, Middle Initial) A. SHAWN STEEL		Date of Receipt 09 11 2011
Mailing Address 27520 HAWTHORNE BLVD		Amount of Each Receipt this Period 500 -
City PALOS VERDES	State Zip Code CA 90274	
FEC ID number of contributing federal political committee. C		
Name of Employer SELF	Occupation ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 	

Full Name (Last, First, Middle Initial) B. KAY McMILLAN		Date of Receipt 09 15 2011
Mailing Address 3006 ENGLEWOOD AVE		Amount of Each Receipt this Period 2500 -
City ROSWELL	State Zip Code NM 88201	
FEC ID number of contributing federal political committee. C		
Name of Employer SELF	Occupation BUSINESS OWNER	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500 -	

Full Name (Last, First, Middle Initial) C.		Date of Receipt
Mailing Address		
City	State Zip Code	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional) ▶

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

3000 -

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)						PAGE 1 OF 1
	<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	
	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b	

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NAME OF COMMITTEE (In Full)
CONSERVATIVE NATIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A. AMODEI FOR NEVADA

Mailing Address: **3652 SOUTH VA ST SUITE C-7**

City: **RENO** State: **NV** Zip Code: **89502**

Purpose of Disbursement: **CONTRIBUTION**

Candidate Name: **MARK AMODEE**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **SPECIAL**

State: **NV** District: **2**

Date of Disbursement: **09 / 22 / 2011**

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

B. BOB TURNER FOR CONGRESS

Mailing Address: **P.O. Box 140016**

City: **HOWARD BEACH** State: **NY** Zip Code: **11414**

Purpose of Disbursement: **CONTRIBUTION**

Candidate Name: **BOB TURNER**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **SPECIAL**

State: **NY** District: **9**

Date of Disbursement: **09 / 22 / 2011**

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

C.

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Purpose of Disbursement: _____

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: _____ District: _____

Date of Disbursement: _____

Amount of Each Disbursement this Period: _____

SUBTOTAL of Disbursements This Page (optional).....> _____

TOTAL This Period (last page this line number only).....> **500.-**

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**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 / OF /

<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 NATIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

A.

JOHN GIZZI

Date of Disbursement

09 / 12 / 2011

Mailing Address

P.O. BOX 101326

City

ARLINGTON

State

VA

Zip Code

22210

Purpose of Disbursement

CONSULTING

001
Category/
Type

Amount of Each Disbursement this Period

500 -

Candidate Name

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B.

RALPH GALLIANO

Date of Disbursement

09 / 12 / 2011

Mailing Address

P.O. BOX 101326

City

ARLINGTON

State

VA

Zip Code

22210

Purpose of Disbursement

CONSULTING

001
Category/
Type

Amount of Each Disbursement this Period

250 -

Candidate Name

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

MM / DD / YYYY

City

State

Zip Code

Purpose of Disbursement

001
Category/
Type

Amount of Each Disbursement this Period

Candidate Name

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

750 -

11030671913

**SCHEDULE D (FEC Form 3X)
DEBTS AND OBLIGATIONS
Excluding Loans**

NAME OF COMMITTEE (In Full)
CONSERVATIVE NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor OMEGA LIST COMPANY	Nature of Debt (Purpose): LIST RENTAL
Mailing Address 1430 Springhill Road # 490	
City State Zip Code McLean VA 22102	

Outstanding Balance Beginning This Period 19,269.39	Amount Incurred This Period 0	Payment This Period 0	Outstanding Balance at Close of This Period 19,269.39
---	---	---------------------------------	---

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Bruce W. Eberle & Associates	Nature of Debt (Purpose): Fundraising
Mailing Address 1430 Springhill Road # 490	
City State Zip Code McLean VA 22102	

Outstanding Balance Beginning This Period 17,974.00	Amount Incurred This Period 0	Payment This Period 0	Outstanding Balance at Close of This Period 17,974.00
---	---	---------------------------------	---

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor GRAPHICS	Nature of Debt (Purpose): Graphics
Mailing Address 8330 Old Courthouse Road	
City State Zip Code	

Outstanding Balance Beginning This Period 3,915.60	Amount Incurred This Period 0	Payment This Period 0	Outstanding Balance at Close of This Period 3,915.60
--	---	---------------------------------	--

1) SUBTOTALS This Period This Page (optional)..... ▶	21,458.35
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

11030671914

SCHEDULE D (FEC Form 3X)
DEBTS AND OBLIGATIONS
 Excluding Loans

NAME OF COMMITTEE (In Full)
CONSERVATIVE NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
CCI Nature of Debt (Purpose):
Computer Printing

Mailing Address
8330 Old Courthouse Road

City State Zip Code
Vienna VA 22180

Outstanding Balance Beginning This Period
1,538.77

Amount Incurred This Period **0** Payment This Period **0** Outstanding Balance at Close of This Period
1,538.77

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
WIB Nature of Debt (Purpose):
Mailing Services

Mailing Address
2727 Merrilee Drive

City State Zip Code
Fairfax VA 22031

Outstanding Balance Beginning This Period
11,227.10

Amount Incurred This Period **0** Payment This Period **0** Outstanding Balance at Close of This Period
11,227.10

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
ARICO Systems Nature of Debt (Purpose):
Computer Printing

Mailing Address
2853 Nutley Street

City State Zip Code
Fairfax VA 22031

Outstanding Balance Beginning This Period
11,651.63

Amount Incurred This Period **0** Payment This Period **0** Outstanding Balance at Close of This Period
11,651.63

1) SUBTOTALS This Period This Page (optional)..... ▶	24,417.50
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

11030671915

**SCHEDULE D (FEC Form 3X)
DEBTS AND OBLIGATIONS
Excluding Loans**

NAME OF COMMITTEE (In Full)
CONSERVATIVE NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
ANDREWS REPRODUCTION CENTER

Nature of Debt (Purpose):
PRINTING

Mailing Address
10101-J BACON DRIVE

City State Zip Code
BELTSVILLE MD 20705

Outstanding Balance Beginning This Period
609720

Amount Incurred This Period
0

Payment This Period
0

Outstanding Balance at Close of This Period
609720

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Carter, Kent & Sullivan

Nature of Debt (Purpose):
Legal Services

Mailing Address
2020 K Street NW

City State Zip Code
Washington DC 20006

Outstanding Balance Beginning This Period
2825988

Amount Incurred This Period
0

Payment This Period
0

Outstanding Balance at Close of This Period
2825988

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Southeast Printing

Nature of Debt (Purpose):
Printing

Mailing Address
2401 Wilson Blvd.

City State Zip Code
Arlington VA 22201

Outstanding Balance Beginning This Period
39906

Amount Incurred This Period
0

Payment This Period
0

Outstanding Balance at Close of This Period
39906

1) SUBTOTALS This Period This Page (optional).....▶	3475614
2) TOTALS This Period (last page this line number only).....▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)▶	

11030671916

SCHEDULE D (FEC Form 3X)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
CONSERVATIVE NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Diversified Mailing Services
 Nature of Debt (Purpose): **Mailing Services**
 Mailing Address: **4333 Davenport Road**
 City State Zip Code: **Fredericksburg VA 22401**

Outstanding Balance Beginning This Period: **44316**
 Amount Incurred This Period: **0**
 Payment This Period: **0**
 Outstanding Balance at Close of This Period: **44316**

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Sir Speedy Printing Centers
 Nature of Debt (Purpose): **Printing**
 Mailing Address: **5881 Leesburg Pike**
 City State Zip Code: **Falls Church VA 22041**

Outstanding Balance Beginning This Period: **89522**
 Amount Incurred This Period: **0**
 Payment This Period: **0**
 Outstanding Balance at Close of This Period: **89522**

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Saturn Corporation
 Nature of Debt (Purpose): **Computer Services**
 Mailing Address: **4701 Lydell Road**
 City State Zip Code: **Cheverly MD 20781**

Outstanding Balance Beginning This Period: **97882**
 Amount Incurred This Period: **0**
 Payment This Period: **0**
 Outstanding Balance at Close of This Period: **97882**

1) SUBTOTALS This Period This Page (optional).....▶	229720
2) TOTALS This Period (last page this line number only).....▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)▶	

11030671917

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Conservative National Committee

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

James K. Jeanblanc

Nature of Debt (Purpose):

Legal Services

Mailing Address

1730 M St. NW

City State

Washington DC

Zip Code

20036

Outstanding Balance Beginning This Period

12,001.63

Amount Incurred This Period

0

Payment This Period

0

Outstanding Balance at Close of This Period

12,001.63

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

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ▶

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

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... ▶

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

12,001.63

9,493.082

11030671918

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt
10/13/11

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

CMN
 PREPARER
 (3/2005)

10/13/11
 DATE PREPARED

11030671919