

**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

Check if different  
than previously  
reported. (ACC)

Arlington

VA

22201

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00010363

3. IS THIS  
REPORTNEW  
(N)**OR**AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

April 15  
Quarterly Report(Q1)July 15  
Quarterly Report(Q2)October 15  
Quarterly Report(Q3)January 31  
Quarterly Report(YE)July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)Termination Report  
(TER)(b) Monthly  
Report  
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

in the  
State of

5. Covering Period

01

01

2011

through

06

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

David Fenner

Signature of Treasurer

Electronically Filed by David Fenner

Date

09

02

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.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# 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	D	D	Y	Y	Y	Y
0	1	0	1	2	0	1	1

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2011</span>		27353.84
(b) Cash on Hand at Beginning of Reporting Period .....	27353.84	
(c) Total Receipts (from Line 19) .....	29690.00	29690.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	57043.84	57043.84
7. Total Disbursements (from Line 31) .....	34861.07	34861.07
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	22182.77	22182.77
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

### For further information contact:

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

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

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

CONSERVATIVE LEADERSHIP POLITICAL ACTION COMMITTEE

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	1	0	1	2	0	1	1

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	1	1

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) .....	24500.00	24500.00
(ii) Unitemized .....	5190.00	5190.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➡	29690.00	29690.00
(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) ..... ➡	29690.00	29690.00
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)) .....	29690.00	29690.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	29690.00	29690.00

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.....	34861.07	34861.07	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	34861.07	34861.07	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00	
24. Independent Expenditure (use Schedule E) .....	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....	0.00	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))..	34861.07	34861.07	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	34861.07	34861.07	

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) .....	29690.00	29690.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	29690.00	29690.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	34861.07	34861.07
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	34861.07	34861.07

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

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

FOR LINE NUMBER: PAGE 6 / 22

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CONSERVATIVE LEADERSHIP POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Mr. Richard H. Cox

Mailing Address 1951 Kakela Drive

City

Honolulu

State

HI

Zip Code

96822

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  
0 6 / 1 7 / 2 0 1 1

Transaction ID: SA11AI.7319

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. John DAndrea

Mailing Address 2184 Terrace Place

City

Sea Girt

State

NJ

Zip Code

08750-1816

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Physicist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11AI.7293

Amount of Each Receipt this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Walter J. Dodel

Mailing Address 238 S. Erie Avenue

City

Lindenhurst

State

NY

Zip Code

11757-5101

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  
0 3 / 3 1 / 2 0 1 1

Transaction ID: SA11AI.7270

Amount of Each Receipt this Period

1000.00

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

1300.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 7 / 22

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

CONSERVATIVE LEADERSHIP POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Martin A. Galasso

Mailing Address 105 Davies Lane

City

Coblesville

State

NY

Zip Code

12043

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Lancaster Development, In-  
c.

Occupation

Construction

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 1 / 2 0 1 1

Transaction ID: SA11AI.7278

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Martin A. Galasso

Mailing Address 105 Davies Lane

City

Coblesville

State

NY

Zip Code

12043

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Lancaster Development, In-  
c.

Occupation

Construction

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 6 / 2 0 1 1

Transaction ID: SA11AI.7303

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Rufus L. Hayden

Mailing Address 508 N. Hidalgo Avenue

City

Alhambra

State

CA

Zip Code

91801-2642

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Investments

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 1 / 2 0 1 1

Transaction ID: SA11AI.7269

Amount of Each Receipt this Period

2000.00

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

3000.00

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

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

Use separate schedule(s)  
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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 LEADERSHIP POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Alex T. Hunt

Mailing Address PO Box 1247

City

Ruston

State

LA

Zip Code

71273-1247

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hunt Forest Products, Inn.

Occupation  
Chairman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 7 / 2 0 1 1

Transaction ID: SA11AI.7258

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Saunders Jones

Mailing Address 66 Pine Crest Road

City

Birmingham

State

AL

Zip Code

35223-1262

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  
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11AI.7282

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Warren G. Keinath, Jr.

Mailing Address 12342 Creekhaven Drive

City

Saint Louis

State

MO

Zip Code

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  
0 3 / 3 1 / 2 0 1 1

Transaction ID: SA11AI.7273

Amount of Each Receipt this Period

2000.00

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

2350.00

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



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

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FOR LINE NUMBER:  
(check only one)

PAGE 9 / 22

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CONSERVATIVE LEADERSHIP POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Mr. Robert D.C. Long

Mailing Address 47 Savannah Trail

City

Hilton Head

State

SC

Zip Code

29926-2693

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 7 / 2 0 1 1

Transaction ID: SA11AI.7250

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

Hilton Head

State

SC

Zip Code

29926-2693

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 7 / 2 0 1 1

Transaction ID: SA11AI.7318

Amount of Each Receipt this Period

4000.00

**C.**

Full Name (Last, First, Middle Initial)

Mrs. Helen L. Marshall

Mailing Address 2027 Back Road

City

Woodstock

State

VA

Zip Code

22664-3343

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 3 / 2 0 1 1

Transaction ID: SA11AI.7310

Amount of Each Receipt this Period

200.00

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

5200.00

**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 10 / 22

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CONSERVATIVE LEADERSHIP POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Kendall C. Miller

Mailing Address 7350 Wakefield Avenue

City

Reedley

State

CA

Zip Code

93654-9405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Farm Manager

Occupation

Kencarol Inc.

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 1 / 2 0 1 1

Transaction ID: SA11AI.7275

Amount of Each Receipt this Period

750.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Ray P. Oden, Jr.

Mailing Address 702 Thora Boulevard

City

Shreveport

State

LA

Zip Code

71106-1824

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 1 1

Transaction ID: SA11AI.7320

Amount of Each Receipt this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Nicholas Peay, Jr.

Mailing Address 2965 Fairmount Blvd.

City

Cleveland Heights

State

OH

Zip Code

44118-4060

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Private Investor

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 1

Transaction ID: SA11AI.7283

Amount of Each Receipt this Period

500.00

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

6250.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 11 / 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 LEADERSHIP POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Mr. Joseph C. Petrone

Mailing Address P.O. Box 1037

City

Dublin

State

NH

Zip Code

03444-1037

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
0	3		2	8		2	0	1	1

Transaction ID: SA11AI.7267

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. William T. Reynolds

Mailing Address 2905 Mars Street

City

Raleigh

State

NC

Zip Code

27604-3923

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
0	3		1	7		2	0	1	1

Transaction ID: SA11AI.7260

Amount of Each Receipt this Period

400.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Lunsford Richardson

Mailing Address 7 Indian Spring Road

City

Norwalk

State

CT

Zip Code

06853-1304

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Executive

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	1	1

Transaction ID: SA11AI.7308

Amount of Each Receipt this Period

3000.00

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

3700.00

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 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 LEADERSHIP POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Col. Ray H. Smith

Mailing Address 228 Lakeside Circle

City

Greenville

State

SC

Zip Code

29615-5323

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	1	1

Transaction ID: SA11AI.7280

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. &amp; Mrs. Donald G. Thomas

Mailing Address 3407 N. Washington

City

Tacoma

State

WA

Zip Code

98407

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
0	6		0	9		2	0	1	1

Transaction ID: SA11AI.7312

Amount of Each Receipt this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

Ms. Gloria Walker

Mailing Address 3974 Dogwood Drive

City

Jackson

State

MS

Zip Code

39211-6703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Transaction ID: SA11AI.7324

Amount of Each Receipt this Period

1000.00

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

1700.00

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

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

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

FOR LINE NUMBER: PAGE 13 / 22

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CONSERVATIVE LEADERSHIP POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Mr. James Wintersteen

Mailing Address 27 Myrtle Avenue

City

Mill Valley

State

CA

Zip Code

94941-1023

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Architect

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 1 1

Transaction ID: SA11AI.7389

Amount of Each Receipt this Period

1000.00

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

1000.00

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

24500.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 14 / 22

<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

A.

Full Name (Last, First, Middle Initial)

CW Accounting Services

Mailing Address 10424 Woodbury Woods Court

City State Zip Code  
Fairfax VA 22032

Purpose of Disbursement  
Prof. Services - Accounting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.7332

Date of Disbursement

/   /

Amount of Each Disbursement this Period

400.00

B.

Full Name (Last, First, Middle Initial)

CW Accounting Services

Mailing Address 10424 Woodbury Woods Court

City State Zip Code  
Fairfax VA 22032

Purpose of Disbursement  
Prof. Services - Accounting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.7345

Date of Disbursement

/   /

Amount of Each Disbursement this Period

300.00

C.

Full Name (Last, First, Middle Initial)

CW Accounting Services

Mailing Address 10424 Woodbury Woods Court

City State Zip Code  
Fairfax VA 22032

Purpose of Disbursement  
Prof. Services - Accounting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.7364

Date of Disbursement

/   /

Amount of Each Disbursement this Period

400.00

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

1100.00

**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)

PAGE 15 / 22

<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

<b>A.</b> Full Name (Last, First, Middle Initial) Adam Guillette	<b>Transaction ID:</b> SB21B.7328 <b>Date of Disbursement</b>																				
Mailing Address 130 Solano Cay Circle	<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>0</td><td>1</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	1		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	1		2	0	1	1												
City State Zip Code Ponte Vedra Beach FL 32082	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Prof. Services - Fund Raising Candidate Name	<table border="1"> <tr> <td colspan="10">1458.33</td> </tr> </table>	1458.33																			
1458.33																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
<b>B.</b> Full Name (Last, First, Middle Initial) Adam Guillette	<b>Transaction ID:</b> SB21B.7329 <b>Date of Disbursement</b>																				
Mailing Address 130 Solano Cay Circle	<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>0</td><td>1</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		3	1		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		3	1		2	0	1	1												
City State Zip Code Ponte Vedra Beach FL 32082	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Prof. Services - Fund Raising Candidate Name	<table border="1"> <tr> <td colspan="10">1458.33</td> </tr> </table>	1458.33																			
1458.33																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
<b>C.</b> Full Name (Last, First, Middle Initial) Adam Guillette	<b>Transaction ID:</b> SB21B.7330 <b>Date of Disbursement</b>																				
Mailing Address 130 Solano Cay Circle	<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>0</td><td>2</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	5		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	5		2	0	1	1												
City State Zip Code Ponte Vedra Beach FL 32082	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Prof. Services - Fund Raising Candidate Name	<table border="1"> <tr> <td colspan="10">1458.33</td> </tr> </table>	1458.33																			
1458.33																					
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) .....

**4374.99**

**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)

PAGE 16 / 22

<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

A.

Full Name (Last, First, Middle Initial)

Adam Guillette

Mailing Address 130 Solano Cay Circle

City State Zip Code  
Ponte Vedra Beach FL 32082

Purpose of Disbursement  
Prof. Services - Fund Raising

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.7331

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1458.33

B.

Full Name (Last, First, Middle Initial)

Adam Guillette

Mailing Address 130 Solano Cay Circle

City State Zip Code  
Ponte Vedra Beach FL 32082

Purpose of Disbursement  
Prof. Services - Fund Raising

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.7333

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2916.67

C.

Full Name (Last, First, Middle Initial)

Adam Guillette

Mailing Address 130 Solano Cay Circle

City State Zip Code  
Ponte Vedra Beach FL 32082

Purpose of Disbursement  
Prof. Services - Fund Raising

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.7334

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2916.67

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

7291.67

**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)

PAGE 17 / 22

<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

<b>A.</b> Full Name (Last, First, Middle Initial) Adam Guillette	<b>Transaction ID:</b> SB21B.7338 <b>Date of Disbursement</b>																				
Mailing Address 130 Solano Cay Circle	<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>0</td><td>4</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	5		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	5		2	0	1	1												
<table border="1"> <tr> <td>City Ponte Vedra Beach</td> <td>State FL</td> <td>Zip Code 32082</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Prof. Services - Fund Raising</td> <td rowspan="2"> <input type="text"/>            Category/ Type         </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Ponte Vedra Beach	State FL	Zip Code 32082	Purpose of Disbursement Prof. Services - Fund Raising		<input type="text"/> Category/ Type	Candidate Name		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>2916.67</td> </tr> </table>	2916.67											
City Ponte Vedra Beach	State FL	Zip Code 32082																			
Purpose of Disbursement Prof. Services - Fund Raising		<input type="text"/> Category/ Type																			
Candidate Name																					
2916.67																					
<table border="1"> <tr> <td>Office Sought:</td> <td> <input type="checkbox"/> House  <input type="checkbox"/> Senate  <input type="checkbox"/> President         </td> <td>Disbursement For:</td> <td> <input type="checkbox"/> Primary  <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </td> </tr> <tr> <td>State:</td> <td>District:</td> <td colspan="2"></td> </tr> </table>	Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State:	District:															
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																		
State:	District:																				
<b>B.</b> Full Name (Last, First, Middle Initial) Adam Guillette	<b>Transaction ID:</b> SB21B.7365 <b>Date of Disbursement</b>																				
Mailing Address 130 Solano Cay Circle	<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>0</td><td>4</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	9		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	9		2	0	1	1												
<table border="1"> <tr> <td>City Ponte Vedra Beach</td> <td>State FL</td> <td>Zip Code 32082</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Reim. travel expenses/postage</td> <td rowspan="2"> <input type="text"/>            Category/ Type         </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Ponte Vedra Beach	State FL	Zip Code 32082	Purpose of Disbursement Reim. travel expenses/postage		<input type="text"/> Category/ Type	Candidate Name		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>717.60</td> </tr> </table>	717.60											
City Ponte Vedra Beach	State FL	Zip Code 32082																			
Purpose of Disbursement Reim. travel expenses/postage		<input type="text"/> Category/ Type																			
Candidate Name																					
717.60																					
<table border="1"> <tr> <td>Office Sought:</td> <td> <input type="checkbox"/> House  <input type="checkbox"/> Senate  <input type="checkbox"/> President         </td> <td>Disbursement For:</td> <td> <input type="checkbox"/> Primary  <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </td> </tr> <tr> <td>State:</td> <td>District:</td> <td colspan="2"></td> </tr> </table>	Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State:	District:															
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																		
State:	District:																				
<b>C.</b> Full Name (Last, First, Middle Initial) Adam Guillette	<b>Transaction ID:</b> SB21B.7339 <b>Date of Disbursement</b>																				
Mailing Address 130 Solano Cay Circle	<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>0</td><td>4</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		3	0		2	0	1	1												
<table border="1"> <tr> <td>City Ponte Vedra Beach</td> <td>State FL</td> <td>Zip Code 32082</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Prof. Services - Fund Raising</td> <td rowspan="2"> <input type="text"/>            Category/ Type         </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Ponte Vedra Beach	State FL	Zip Code 32082	Purpose of Disbursement Prof. Services - Fund Raising		<input type="text"/> Category/ Type	Candidate Name		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>2916.67</td> </tr> </table>	2916.67											
City Ponte Vedra Beach	State FL	Zip Code 32082																			
Purpose of Disbursement Prof. Services - Fund Raising		<input type="text"/> Category/ Type																			
Candidate Name																					
2916.67																					
<table border="1"> <tr> <td>Office Sought:</td> <td> <input type="checkbox"/> House  <input type="checkbox"/> Senate  <input type="checkbox"/> President         </td> <td>Disbursement For:</td> <td> <input type="checkbox"/> Primary  <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </td> </tr> <tr> <td>State:</td> <td>District:</td> <td colspan="2"></td> </tr> </table>	Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State:	District:															
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																		
State:	District:																				

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

**6550.94**

**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)

PAGE 18 / 22

<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

A.

Full Name (Last, First, Middle Initial)

Adam Guillette

Mailing Address 130 Solano Cay Circle

City State Zip Code  
Ponte Vedra Beach FL 32082

Purpose of Disbursement  
Prof. Services - Fund Raising

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.7340

Date of Disbursement

05 / 15 / 2011

Amount of Each Disbursement this Period

2916.67

B.

Full Name (Last, First, Middle Initial)

Adam Guillette

Mailing Address 130 Solano Cay Circle

City State Zip Code  
Ponte Vedra Beach FL 32082

Purpose of Disbursement  
Reim travel expenses/office supplies/postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.7346

Date of Disbursement

05 / 21 / 2011

Amount of Each Disbursement this Period

1346.84

C.

Full Name (Last, First, Middle Initial)

Adam Guillette

Mailing Address 130 Solano Cay Circle

City State Zip Code  
Ponte Vedra Beach FL 32082

Purpose of Disbursement  
Prof. Services - Fund Raising

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.7341

Date of Disbursement

05 / 31 / 2011

Amount of Each Disbursement this Period

2916.67

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

7180.18

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)

PAGE 19 / 22

<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

<b>A.</b> Full Name (Last, First, Middle Initial) Adam Guillette	<b>Transaction ID:</b> SB21B.7342 <b>Date of Disbursement</b>																				
Mailing Address 130 Solano Cay Circle	<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>0</td><td>6</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	5		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	5		2	0	1	1												
<table border="1"> <tr> <td>City Ponte Vedra Beach</td> <td>State FL</td> <td>Zip Code 32082</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Prof. Services - Fund Raising</td> <td rowspan="2"> <input type="checkbox"/>            Category/ Type         </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Ponte Vedra Beach	State FL	Zip Code 32082	Purpose of Disbursement Prof. Services - Fund Raising		<input type="checkbox"/> Category/ Type	Candidate Name		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>2916.67</td> </tr> </table>	2916.67											
City Ponte Vedra Beach	State FL	Zip Code 32082																			
Purpose of Disbursement Prof. Services - Fund Raising		<input type="checkbox"/> Category/ Type																			
Candidate Name																					
2916.67																					
<table border="1"> <tr> <td>Office Sought:</td> <td> <input type="checkbox"/> House  <input type="checkbox"/> Senate  <input type="checkbox"/> President         </td> <td>Disbursement For:</td> <td> <input type="checkbox"/> Primary  <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </td> </tr> <tr> <td>State:</td> <td>District:</td> <td colspan="2"></td> </tr> </table>	Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State:	District:															
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																		
State:	District:																				
<b>B.</b> Full Name (Last, First, Middle Initial) Adam Guillette	<b>Transaction ID:</b> SB21B.7351 <b>Date of Disbursement</b>																				
Mailing Address 130 Solano Cay Circle	<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>0</td><td>6</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	5		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	5		2	0	1	1												
<table border="1"> <tr> <td>City Ponte Vedra Beach</td> <td>State FL</td> <td>Zip Code 32082</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Reim. travel expenses</td> <td rowspan="2"> <input type="checkbox"/>            Category/ Type         </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Ponte Vedra Beach	State FL	Zip Code 32082	Purpose of Disbursement Reim. travel expenses		<input type="checkbox"/> Category/ Type	Candidate Name		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>1282.89</td> </tr> </table>	1282.89											
City Ponte Vedra Beach	State FL	Zip Code 32082																			
Purpose of Disbursement Reim. travel expenses		<input type="checkbox"/> Category/ Type																			
Candidate Name																					
1282.89																					
<table border="1"> <tr> <td>Office Sought:</td> <td> <input type="checkbox"/> House  <input type="checkbox"/> Senate  <input type="checkbox"/> President         </td> <td>Disbursement For:</td> <td> <input type="checkbox"/> Primary  <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </td> </tr> <tr> <td>State:</td> <td>District:</td> <td colspan="2"></td> </tr> </table>	Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State:	District:															
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																		
State:	District:																				
<b>C.</b> Full Name (Last, First, Middle Initial) Adam Guillette	<b>Transaction ID:</b> SB21B.7344 <b>Date of Disbursement</b>																				
Mailing Address 130 Solano Cay Circle	<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>0</td><td>6</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		3	0		2	0	1	1												
<table border="1"> <tr> <td>City Ponte Vedra Beach</td> <td>State FL</td> <td>Zip Code 32082</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Prof. Services - Fund Raising</td> <td rowspan="2"> <input type="checkbox"/>            Category/ Type         </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Ponte Vedra Beach	State FL	Zip Code 32082	Purpose of Disbursement Prof. Services - Fund Raising		<input type="checkbox"/> Category/ Type	Candidate Name		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>2916.67</td> </tr> </table>	2916.67											
City Ponte Vedra Beach	State FL	Zip Code 32082																			
Purpose of Disbursement Prof. Services - Fund Raising		<input type="checkbox"/> Category/ Type																			
Candidate Name																					
2916.67																					
<table border="1"> <tr> <td>Office Sought:</td> <td> <input type="checkbox"/> House  <input type="checkbox"/> Senate  <input type="checkbox"/> President         </td> <td>Disbursement For:</td> <td> <input type="checkbox"/> Primary  <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </td> </tr> <tr> <td>State:</td> <td>District:</td> <td colspan="2"></td> </tr> </table>	Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State:	District:															
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																		
State:	District:																				

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

**7116.23**

**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)

PAGE 20 / 22

<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

<b>A.</b> Full Name (Last, First, Middle Initial) Hampton Inn	<b>Transaction ID:</b> SB21B.7347 <b>Date of Disbursement</b>
Mailing Address 2755 Commercial Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 1 / 2 0 1 1</div> </div>
City Port Allen State LA Zip Code 70767	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Lodging	<div> <div></div> <div>311.54</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Hampton Inn	<b>Transaction ID:</b> SB21B.7357 <b>Date of Disbursement</b>
Mailing Address 2755 Commercial Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 5 / 2 0 1 1</div> </div>
City Port Allen State LA Zip Code 70767	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Lodging	<div> <div></div> <div>201.47</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Hertz Rent a Car	<b>Transaction ID:</b> SB21B.7356 <b>Date of Disbursement</b>
Mailing Address P.O. Box 18626	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 5 / 2 0 1 1</div> </div>
City Jacksonville State FL Zip Code 32229	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Car rental	<div> <div></div> <div>249.07</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>

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

**0.00**

**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)

PAGE 21 / 22

<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

<b>A.</b> Full Name (Last, First, Middle Initial) LLC Hinkey Company	<b>Transaction ID:</b> SB21B.7335 <b>Date of Disbursement</b>																				
Mailing Address 9058 Euclid Avenue	<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>0</td><td>3</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	3		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	3		2	0	1	1												
City Manassas State VA Zip Code 20110	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Postage Candidate Name	<table border="1"> <tr> <td colspan="10">447.30</td> </tr> </table>	447.30																			
447.30																					
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>B.</b> Full Name (Last, First, Middle Initial) LLC Hinkey Company	<b>Transaction ID:</b> SB21B.7337 <b>Date of Disbursement</b>																				
Mailing Address 9058 Euclid Avenue	<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>0</td><td>3</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	1		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	1		2	0	1	1												
City Manassas State VA Zip Code 20110	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Printing/Mail Shop Candidate Name	<table border="1"> <tr> <td colspan="10">579.36</td> </tr> </table>	579.36																			
579.36																					
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>C.</b> Full Name (Last, First, Middle Initial) Jet Blue	<b>Transaction ID:</b> SB21B.7360 <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 17435	<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>0</td><td>6</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	5		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	5		2	0	1	1												
City Salt Lake City State UT Zip Code 84117	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Air fare Candidate Name	<table border="1"> <tr> <td colspan="10">289.70</td> </tr> </table>	289.70																			
289.70																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

[MEMO ITEM]

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

1026.66

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 22 / 22

<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

A.

Full Name (Last, First, Middle Initial)

US Airways

Mailing Address 4000 E Sky Harbor Blvd.

City State Zip Code  
Phoenix AZ 85034

Purpose of Disbursement

Air fare

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.7376

Date of Disbursement

06 / 25 / 2011

Amount of Each Disbursement this Period

240.40

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

US Postal Service

Mailing Address 1539 3rd Street S

City State Zip Code  
Jacksonville Beach FL 32250

Purpose of Disbursement

Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.7366

Date of Disbursement

04 / 19 / 2011

Amount of Each Disbursement this Period

264.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

US Postal Service

Mailing Address 1539 3rd Street S

City State Zip Code  
Jacksonville Beach FL 32250

Purpose of Disbursement

Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.7349

Date of Disbursement

05 / 21 / 2011

Amount of Each Disbursement this Period

478.60

[MEMO ITEM]

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

0.00

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

34640.67