

**FEC
FORM 3X**

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

RECEIVED

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

2011 DEC 13 AM 9:52
FEC 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)
- 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)
- Convention (12C)
- General (12G)
- Special (12S)
- Runoff (12R)

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

06' 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

RALPH F. GALLIANO

Signature of Treasurer

R. 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.

Office Use Only

FEC FORM 3X
Rev. 12/2004

11030671921

**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: 06 ' 01 ' 2011 To: 06 ' 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>618375</u>	
(c) Total Receipts (from Line 19)	<u>1000-</u>	<u>8250-</u>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<u>718375</u>	<u>1201340</u>
7. Total Disbursements (from Line 31)	<u>1000-</u>	<u>582965</u>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<u>618375</u>	<u>618375</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

11030671922

**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:

06 01 2011

To:

06 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).....

1,000 -
0
1,000 -
0
0

8,000 -
0
8,000 -
0
0

(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)..... ▶

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

1,000 -
0
0
0

8,000 -
0
0
0

13. All Loans Received.....

14. Loan Repayments Received.....

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

0

0

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

0

250 -

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

0

0

18. Transfers from Non-Federal and Levin Funds

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

0

0

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

0

0

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

0

0

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

1,000 -

8,250 -

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

1,000 -

8,250 -

11030671923

**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)	1,000 -	8,000 -
34. Total Contribution Refunds (from Line 28(d))	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1,000 -	8,000 -
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	750 -	582,965
37. Offsets to Operating Expenditures (from Line 15, page 3)	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36)	750 -	582,965

11030671925

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

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

FOR LINE NUMBER: PAGE 1 OF 1
(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 NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
P. ROBERT FANNIN

Mailing Address
6210 N. 31ST PLACE

City **PHOENIX** State **AZ** Zip Code **85016**

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

Name of Employer **STEPHENS & JOHNSON LLP** Occupation **ATTORNEY**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000-

Date of Receipt
06 27 2011

Amount of Each Receipt this Period
1000-

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶ **1000-**

11030671926

**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 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

06 / 10 / 2011

Mailing Address

P.O. Box 101326

City

ARLINGTON

State

VA

Zip Code

22210

Purpose of Disbursement

CONSULTING

00.1
Category/
Type

Amount of Each Disbursement this Period

500.00

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

06 / 10 / 2011

Mailing Address

P.O. Box 101326

City

ARLINGTON

State

VA

Zip Code

22210

Purpose of Disbursement

CONSULTING

00.1
Category/
Type

Amount of Each Disbursement this Period

250.00

Candidate Name

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

MM / DD / YYYY

Mailing Address

City

State

Zip Code

Purpose of Disbursement

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)

750.00

11030671927

**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

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. **CRAIG HUEY FOR CONGRESS**

Mailing Address

P.O. BOX 5404

City

TORRENCE

State

CA

Zip Code

90510

Purpose of Disbursement

CONTRIBUTION

Candidate Name

CRAIG HUEY

0.11

Category/
Type

Date of Disbursement

06 / 29 / 2011

Amount of Each Disbursement this Period

250.-

Office Sought:

House

Senate

President

State: **CA**

District: **36**

Disbursement For:

Primary

General

Other (specify)

SPECIAL

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Date of Disbursement

Amount of Each Disbursement this Period

Office Sought:

House

Senate

President

State:

District:

Disbursement For:

Primary

General

Other (specify)

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Date of Disbursement

Amount of Each Disbursement this Period

Office Sought:

House

Senate

President

State:

District:

Disbursement For:

Primary

General

Other (specify)

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

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

250.-

11030671928

**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
1926939

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
1926939

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
179740

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
179740

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
39156

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
39156

1) SUBTOTALS This Period This Page (optional)..... ▶	2145835
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) ▶	

11030671929

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 2 OF 5
	FOR LINE NUMBER: (check only one)
	<input type="checkbox"/> 9
	<input checked="" type="checkbox"/> 10

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) ▶	

11030671930

**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) ▶	

11030671931

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).....▶	229920
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)▶	

11030671932

**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 James K. Jeanblanc	Nature of Debt (Purpose): Legal Services
Mailing Address 1730 M St. NW	
City State Zip Code Washington DC 20036	

Outstanding Balance Beginning This Period 1200163	Amount Incurred This Period 0	Payment This Period 0	Outstanding Balance at Close of This Period 1200163
---	---	---------------------------------	---

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)..... ▶	1200163
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) ▶	9493087

11030671933

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.

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt <i>10/13/11</i>
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

JMD
 PREPARER *10/13/11*
DATE PREPARED

11030671934