

**FEC
FORM 3X**

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

RECEIVED
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2015 NOV 18 AM 9:18
Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

CONSERVATIVE NATIONAL COMMITTEE

ADDRESS (number and street) PO 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) 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)

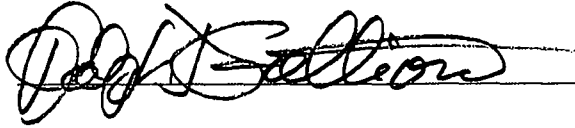
- (c) 12-Day PRE-Election Report for the:
- Primary (12P) General (12G) Runoff (12R)
 - Convention (12C) Special (12S)
- Election on 11 / 08 / 2015 in the State of VA

- (d) 30-Day POST-Election Report for the:
- General (30G) Runoff (30R) Special (30S)
- Election on 11 / 08 / 2015 in the State of VA

5. Covering Period 10 / 01 / 2015 through 10 / 31 / 2015

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  Date 11 / 18 / 2015

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

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**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:

10 ' 01 ' 2015

To:

10 ' 31 ' 2015

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand January 1, 2015 | | 0 |
| (b) Cash on Hand at Beginning of Reporting Period..... | 0 | |
| (c) Total Receipts (from Line 19) | 0 | 0 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 0 | 0 |
| 7. Total Disbursements (from Line 31) | 0 | 0 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 0 | 0 |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | 0 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | 9493082 | |



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

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Page 3

Write or Type Committee Name

CONSERVATIVE NATIONAL COMMITTEE

Report Covering the Period: From:

10 / 01 / 2015

To:

10 / 31 / 2015

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).....

0

0

(ii) Unitemized.....

0

0

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

0

0

(b) Political Party Committees.....

0

0

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

0

0

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

0

0

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

0

0

13. All Loans Received.....

0

0

14. Loan Repayments Received.....

0

0

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

0

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)).....▶

0

0

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

0

0

NON-FEDERAL AND LEVIN FUNDS

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)) | 0 | 0 |
| 22. Transfers to Affiliated/Other Party Committees..... | | |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | | |
| 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)).. | 0 | 0 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 0 | 0 |

OPTIONAL FORM NO. 104 - 10-1-79

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
0 0 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
0 0 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
VIENNA VA 22180

Outstanding Balance Beginning This Period
39156

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0 0 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)▶ | |

NOTION SOFTWARE CORPORATION

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 ANDREWS REPRODUCTION CENTER | | Nature of Debt (Purpose): PRINTING |
| Mailing Address 10101-J BACON DRIVE | | |
| City BELTSVILLE | State MD | Zip Code 20705 |
| Outstanding Balance Beginning This Period 609720 | | Outstanding Balance at Close of This Period 609720 |
| Amount Incurred This Period 0 | Payment This Period 0 | |

| | | |
|--|---------------------------------|---|
| 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 Washington DC | State DC | Zip Code 20006 |
| Outstanding Balance Beginning This Period 2825988 | | Outstanding Balance at Close of This Period 2825988 |
| Amount Incurred This Period 0 | Payment This Period 0 | |

| | | |
|---|---------------------------------|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Southeast Printing | | Nature of Debt (Purpose): Printing |
| Mailing Address 2401 Wilson Blvd. | | |
| City Arlington | State VA | Zip Code 22201 |
| Outstanding Balance Beginning This Period 39906 | | Outstanding Balance at Close of This Period 39906 |
| Amount Incurred This Period 0 | Payment This Period 0 | |

| | |
|--|----------------|
| 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)▶ | |

2025 RELEASE UNDER E.O. 14176

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 87522 | Amount Incurred This Period 0 | Payment This Period 0 | Outstanding Balance at Close of This Period 87522 |
|---|---|---------------------------------|---|

| | |
|---|---|
| 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)▶ | |

2011-11-18 10:00 AM

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