

**FEC
FORM 3X**

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

RECEIVED

2013 MAR 15 AM 9:40

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 ▲

C 00139097

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

MM / DD / YYYY

In the
State of

XX

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

- ☐ General (30G)

- ☐ Runoff (30R)

- ☐ Special (30S)

Election on

MM / DD / YYYY

In the
State of

XX

5. Covering Period

02 / 01 / 2013

through

02 / 28 / 2013

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

03 / 13 / 2013

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 NATIONAL COMMITTEE

Report Covering the Period:

From:

02 / 01 / 2013

To:

02 / 28 / 2013

**COLUMN A
This Period**

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

6. (a) Cash on Hand
January 1, 2013

10333

(b) Cash on Hand at
Beginning of Reporting Period.....

10193

(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)

10133

10333

7. Total Disbursements (from Line 31)

200

400

8. Cash on Hand at Close of
Reporting Period
(subtract Line 7 from Line 6(d))

9933

9933

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

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

CONSERVATIVE NATIONAL COMMITTEE

Report Covering the Period: From:

02 ' 01 ' 2013

To:

02 ' 28 ' 2013

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).....

(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.....

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))..

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))..... ▶

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

0

0

0

0

0

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0

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0

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0

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Page 4

COLUMN B
Calendar Year-to-Date

- 400
- ⊕
- 400
- 400

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

**III. Net Contributions/Operating Ex-
penditures**

**COLUMN A
Total This Period**

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

- 33. Total Contributions (other than loans)
(from Line 11(d), page 3)
- 34. Total Contribution Refunds
(from Line 28(d))
- 35. Net Contributions (other than loans)
(subtract Line 34 from Line 33)
- 36. Total Federal Operating Expenditures
(add Line 21(a)(i) and Line 21(b))▶
- 37. Offsets to Operating Expenditures
(from Line 15, page 3).....
- 38. Net Operating Expenditures
(subtract Line 37 from Line 36)▶

0
0
0
200
0
200

0
0
0
400
0
400

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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

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 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. **BB&T**

Mailing Address

P.O. BOX

819

City

WILSON

State

NC

Zip Code

27894

Purpose of Disbursement

SERVICE CHARGE

Candidate Name

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

02 / 27 / 2013

Amount of Each Disbursement this Period

200

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

000

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

000

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

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

200

13031044965

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

PAGE 1 OF 5

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

OMEGA LIST COMPANY

Nature of Debt (Purpose):

LIST RENTAL

Mailing Address

1430 Springhill Road # 490

City State

McLean VA

Zip Code

22102

Outstanding Balance Beginning This Period

1926939

Amount Incurred This Period

0

Payment This Period

0

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

McLean VA

Zip Code

22102

Outstanding Balance Beginning This Period

179740

Amount Incurred This Period

0

Payment This Period

0

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

0

Payment This Period

0

Outstanding Balance at Close of This Period

39156

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) ▶

2145835

1303104966

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)

☐ 9
☒ 40

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

Vienna VA

Zip Code

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

Fairfax VA

Zip Code

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

Fairfax VA

Zip Code

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)..... ▶

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) ▶

24,417.50

13031044967

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

PAGE **3** OF **5**

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 REMODELATION CENTER

Nature of Debt (Purpose):

PRINTING

Mailing Address

10101-J BACON DRIVE

City State

BELTSVILLE

Zip Code

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

Washington DC

Zip Code

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

Arlington

State

VA

Zip Code

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)..... ▶

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) ▶

3475614

13031044968

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

PAGE **4** OF **5**

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

Diversified Mailing Services

Nature of Debt (Purpose):

Mailing Services

Mailing Address

4333 Davenport Road

City State

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

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

Chesverly 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)..... ▶

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) ▶

229720

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SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

PAGE **5** OF **5**

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

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)..... ▶

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) ▶

1200163
9493082

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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
3/15/13

☐ USPS First Class Mail Postmarked

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

☐ USPS Express Mail Postmarked

☐ Postmark Illegible

☐ No Postmark

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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

Amr

PREPARER

(3/2005)

3/15/13
DATE PREPARED

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