

**FEC
FORM 3X**

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

RECEIVED
FEC MAIL
OPERATIONS CENTER

2006 JAN 24 9:40

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

AMERICAN SHEEP INDUSTRY ASSOC RAM PAC

ADDRESS (number and street) 9785 MAROON CIE #360

Check if different than previously reported. (ACC) ENGLEWOOD CO 80112

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

C00043059 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 MM / DD / YYYY in the State of .

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

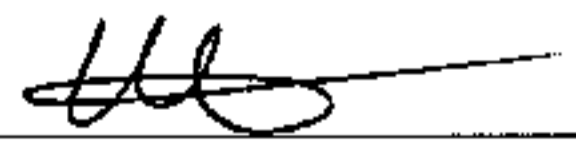
General (30G) Runoff (30R) Special (30S)

Election on MM / DD / YYYY in the State of .

5. Covering Period 07 / 01 / 2005 through 12 / 31 / 2005

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 VICKIE GEBAUER

Signature of Treasurer  Date 01 / 01 / 2006

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

American Sheep Industry Assoc Ram Pac

Report Covering the Period: From: **07** ' **01** ' **2005** To: **12** ' **31** ' **2005**

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2005		1757212
(b) Cash on Hand at Beginning of Reporting Period.....	2190642	
(c) Total Receipts (from Line 19).....	853151	2401116
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	3043793	4158328
7. Total Disbursements (from Line 31).....	232237	1346772
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	2811556	2811556
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).....	0	

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

2005 07 01 12 31 2005

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

American Sleep Industry Assoc Ram Pac

Report Covering the Period: From: **07** ' **07** ' **2005** To: **12** ' **31** ' **2005**

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)).....▶

580.00

137,100.00

7,951.51

103,041.16

8,531.51

240,111.16

- (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)

0

0

0

0

8,531.51

240,111.16

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)).....▶

8,531.51

240,111.16

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

8,531.51

240,111.16

DETAILED SUMMARY PAGE
of Disbursements

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))		
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees	232237	1346772
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)).....		
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)).....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	232237	1346772
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	232237	1346772

20030305

DETAILED SUMMARY PAGE
of Disbursements

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)
- 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)

853151
853151

2401116
2401116

26038853201

**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 1 OF 1	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
				<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
American Sleep Industry Assoc Ram Pac

A. Full Name (Last, First, Middle Initial)
RICHARD ROSEAN

Mailing Address
1270 CHEMEKETA ST NE

City **SALEM, OR** State Zip Code **97301**

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

Name of Employer **SELF EMPLOYED** Occupation **Rancher**

Receipt For:
 Primary General
 Other (specify) **Contribution**

Aggregate Year-to-Date **27500**

Date of Receipt
11 / 16 / 2005

Amount of Each Receipt this Period
6000

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

Mailing Address
POB 65

City **EATON CO** State Zip Code **80615**

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

Name of Employer **Rancher SELF EMPLOYED** Occupation **SELF EMPLOYED**

Receipt For:
 Primary General
 Other (specify) **Contribution**

Aggregate Year-to-Date **45000**

Date of Receipt
12 / 14 / 2005

Amount of Each Receipt this Period
45000

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

Mailing Address
PO DRAWER 231

City **San Angelo TX** State Zip Code **76902**

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

Name of Employer **SELF EMPLOYED** Occupation **Rancher**

Receipt For:
 Primary General
 Other (specify) **Contribution**

Aggregate Year-to-Date **7000**

Date of Receipt
12 / 08 / 2005

Amount of Each Receipt this Period
7000

SUBTOTAL of Receipts This Page (optional) **58000**

TOTAL This Period (last page this line number only) **58000**

20050303

**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)

<input 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 checked="" 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)

American Sleep Industry Assoc Ram Pac

Full Name (Last, First, Middle Initial)

A. *PETER ORWICK*

Date of Disbursement

09 / *12* / *2005*

Mailing Address

9785 MAROON Cir #360

City

Englewood

State

CO

Zip Code

80112

Purpose of Disbursement

AUCTION ITEM

Candidate Name

Category/Type

Amount of Each Disbursement this Period

18500

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

AUCTION ITEM

Full Name (Last, First, Middle Initial)

B. *PETER ORWICK*

Date of Disbursement

10 / *04* / *2005*

Mailing Address

9785 MAROON Cir #360

City

Englewood

State

CO

Zip Code

80112

Purpose of Disbursement

AUCTION ITEM

Candidate Name

Category/Type

Amount of Each Disbursement this Period

36442

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

AUCTION ITEM

Full Name (Last, First, Middle Initial)

C. *CITYWIDE BANK*

Date of Disbursement

10 / *31* / *2005*

Mailing Address

13731 E. MISSISSIPPI AVE

City

AURORA

State

CO

Zip Code

80012

Purpose of Disbursement

BANK SERVICE CHARGE

Candidate Name

Category/Type

Amount of Each Disbursement this Period

200

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

BANK SERVICE CHARGE

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

55142

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

26030953263

**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 2 OF 2
	<input type="checkbox"/> 21b <input type="checkbox"/> 27	<input type="checkbox"/> 22 <input type="checkbox"/> 28a	<input type="checkbox"/> 23 <input type="checkbox"/> 28b	<input type="checkbox"/> 24 <input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 25 <input checked="" type="checkbox"/> 29	<input type="checkbox"/> 26 <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)
American Sheep Industry Assoc Ram PAC

A. *POMBO FOR CONGRESS*
 Full Name (Last, First, Middle Initial)
 Mailing Address: *2150 RIVER PLAZA DR. STE 150*
 City: *SACRAMENTO* State: *CA* Zip Code: *95833*
 Date of Disbursement: *11/15/2005*
 Purpose of Disbursement: _____
 Candidate Name: *RICHARD POMBO*
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) _____
 State: *CA* District: *11*
 Amount of Each Disbursement this Period: *1,000.00*

B. *PETER ORWICK*
 Full Name (Last, First, Middle Initial)
 Mailing Address: *9785 MAROON CIR #360*
 City: *ENGLEWOOD* State: *CO* Zip Code: *80112*
 Date of Disbursement: *12/05/2005*
 Purpose of Disbursement: *AUCTION ITEM*
 Candidate Name: _____
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) *AUCTION ITEM*
 State: _____ District: _____
 Amount of Each Disbursement this Period: *20.95*

C. *SPENCE RULE*
 Full Name (Last, First, Middle Initial)
 Mailing Address: *45751 CR Q*
 City: *AKRON* State: *CO* Zip Code: *80720*
 Date of Disbursement: *12/13/2005*
 Purpose of Disbursement: *AUCTION ITEM*
 Candidate Name: _____
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) *AUCTION ITEM*
 State: _____ District: _____
 Amount of Each Disbursement this Period: *750.00*

SUBTOTAL of Disbursements This Page (optional)..... *1,770.95*
 TOTAL This Period (last page this line number only)..... *2,322.37*

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 type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) 1/11/06
<input type="checkbox"/> USPS Priority Mail Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	Postmarked
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify): Next Business Day Delivery <input type="checkbox"/>	Shipping Date
<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

Sei
PREPARER

1/24/06
DATE PREPARED

60
60
60
60
60
60
60
60
60
60
60