

RECEIVED
FEDERAL ELECTION
COMMISSION
PUBLIC DISCLOSURE
DIVISION

2006 NOV -3 P 6:08

FEC FORM 9

24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

1. Individual, Organization or Qualified Nonprofit Corporation Making the Disbursement/Obligations	
(a) Name Club For Growth .NET	
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 2001 L St., NW, Suite 699	2. FEC Identification Number C30000269
(c) City, State and ZIP Code Washington, DC 20036	
(d) Name of Employer or Principal Place of Business N/A	(e) Occupation N/A
3. Is This Statement <input checked="" type="checkbox"/> New or <input type="checkbox"/> Amended	4. Covering Period 10/29/2006 through 11/02/2006
5. (a) Date of Public Distribution(s) 11/02/2006	(b) Communication Title "Tax Cuts"
6. Is the Filer a Qualified Nonprofit Corporation under 11 CFR 114.107?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
7. Were the disbursements for the electioneering communication made exclusively from donations to a segregated bank account?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
8. Custodian of Records	
(a) Name David Keating, Secretary	
(b) Address (number and street) 2001 L St., NW, Suite 699	
(c) City, State and ZIP Code Washington, DC 20036	
(d) Name of Employer or Principal Place of Business Club for Growth	(e) Occupation Executive Director
9. Total Donations This Statement	60,000.00
10. Total Disbursements/Obligations This Statement	80,710.00

Under penalty of perjury, I certify that this statement is true, correct and complete. In addition, if the electioneering communications reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

David Keating

SIGNATURE

DATE

11/3/06

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

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List of Person(s) Sharing/Exercising Control
(use additional pages as necessary)

PAGE 2 OF 4

11. Person(s) Sharing/Exercising Control

A.	
(a) Name Pat Toomey	
(b) Address (number and street) 2001 L St., NW, Suite 699	
(c) City, State and ZIP Code Washington, DC 20036	
(d) Name of Employer or Principal Place of Business Club for Growth	(e) Occupation President
B.	
(a) Name Jackson T. Stephens, Jr.	
(b) Address (number and street) 2001 L St., NW, Suite 699	
(c) City, State and ZIP Code Washington, DC 20036	
(d) Name of Employer or Principal Place of Business EOE, Inc.	(e) Occupation President & CEO
C.	
(a) Name Susan Zimskind	
(b) Address (number and street) 2001 L St., NW, Suite 699	
(c) City, State and ZIP Code Washington, DC 20036	
(d) Name of Employer or Principal Place of Business Pro Growth Action Team	(e) Occupation Administrative Director
D.	
(a) Name David Keating	
(b) Address (number and street) 2001 L St., NW, Suite 699	
(c) City, State and ZIP Code Washington, DC 20036	
(d) Name of Employer or Principal Place of Business Club for Growth	(e) Occupation Executive Director
E.	
(a) Name Gary R. Faulkner	
(b) Address (number and street) 2001 L St., NW, Suite 699	
(c) City, State and ZIP Code Washington, DC 20036	
(d) Name of Employer or Principal Place of Business EOE, Inc.	(e) Occupation Vice President

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SCHEDULE 9-A
Donation(s) Received

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<p>A. Full Name of Donor Richard Weiss</p> <hr/> <p>Mailing Address of Donor 1304 Hawthorne Lane</p> <hr/> <p>City State Zip Hinsdale, IL 60521</p>	<p>Date of Receipt <input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2006"/></p> <p>Amount <input type="text" value="10,000.00"/></p>
<p>B. Full Name of Donor Jackson Stephens, Jr.</p> <hr/> <p>Mailing Address of Donor 111 Center St., Suite 1616</p> <hr/> <p>City State Zip Little Rock, AR 72201</p>	<p>Date of Receipt <input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2006"/></p> <p>Amount <input type="text" value="50,000.00"/></p>
<p>C. Full Name of Donor</p> <hr/> <p>Mailing Address of Donor</p> <hr/> <p>City State Zip</p>	<p>Date of Receipt <input type="text"/> / <input type="text"/> / <input type="text"/></p> <p>Amount <input type="text"/></p>
<p>D. Full Name of Donor</p> <hr/> <p>Mailing Address of Donor</p> <hr/> <p>City State Zip</p>	<p>Date of Receipt <input type="text"/> / <input type="text"/> / <input type="text"/></p> <p>Amount <input type="text"/></p>
<p>E. Full Name of Donor</p> <hr/> <p>Mailing Address of Donor</p> <hr/> <p>City State Zip</p>	<p>Date of Receipt <input type="text"/> / <input type="text"/> / <input type="text"/></p> <p>Amount <input type="text"/></p>
<p>SUBTOTAL of Donations This Page (optional) ▶ <input type="text"/></p> <hr/> <p>TOTAL This Period (last page this line number only) ▶ <input type="text" value="60,000.00"/> (carry total from last page to Line 9)</p>	

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee Red Sea				Date of Disbursement or Obligation MM / DD / YYYY 11 / 02 / 2006	
Mailing Address of Payee 1111 19th St., NW, Ste. 211				Amount 80,710.00	
City Washington, DC 20036		State		Zip Code	
Name of Employer N/A		Occupation N/A		Communication Date MM / DD / YYYY 11 / 02 / 2006	
Purpose of Disbursement (Including title(s) of communication(s)) Television Advertisement, "Tax Cuts", Air Buy 11/2/06-11/6/06					
Name of Federal Candidate Scott Kleeb		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: NE District: 03	
Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶					
Name of Federal Candidate		Office Sought:		State:	
Name of Federal Candidate		Office Sought:		State:	
Name of Federal Candidate		Office Sought:		State:	
B. Full Name (Last, First, Middle Initial) of Payee					
Mailing Address of Payee				Date of Disbursement or Obligation	
City				Amount	
Name of Employer		Occupation		Communication Date	
Purpose of Disbursement (Including title(s) of communication(s))					
Name of Federal Candidate		Office Sought:		State:	
Name of Federal Candidate		Office Sought:		State:	
Name of Federal Candidate		Office Sought:		State:	
SUBTOTAL of Disbursements/Obligations This Page (optional)					
TOTAL This Period (last page this line number only) (carry total from last page to Line 10)					
				80,710.00	

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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.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<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 checked="" type="checkbox"/> Other (Specify): <i>Σ-Mail</i>	Date of Receipt or Postmarked <i>11/3/06</i>

	<i>11/3/06</i>
PREPARER	DATE PREPARED

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