

**FEC
FORM 3X**

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

RECEIVED
FEC MAIL
OPERATIONS CENTER

2006 JAN 19 A 8:55
Office Use Only

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

A.Q. SMITH POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 11270 W. PARK PLACE

Check if different than previously reported. (ACC) MILWAUKEE WI 53223

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

C 00104687 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 01 / 01 / 2005 In the State of WI

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

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

Election on 01 / 01 / 2005 In the State of WI

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 PATRICIA K. ACKERMAN

Signature of Treasurer *Patricia K. Ackerman* Date 01 / 11 / 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.

26038951431

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

A.O. SMITH POLITICAL ACTION COMMITTEE

Report Covering the Period: From: / / To: / /

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand January 1, <input type="text" value="2005"/> | | 2,574.38 |
| (b) Cash on Hand at Beginning of Reporting Period..... | 6,860.56 | |
| (c) Total Receipts (from Line 19)..... | 5,111.69 | 9,397.87 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | 11,972.25 | 11,972.25 |
| 7. Total Disbursements (from Line 31)..... | -0- | -0- |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | 11,972.25 | 11,972.25 |
| 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

26038951432

**DETAILED SUMMARY PAGE
of Receipts**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

A.O. SMITH POLITICAL ACTION COMMITTEE

Report Covering the Period: From: MM / DD / YYYY 07 / 01 / 2005 To: MM / DD / YYYY 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).....

4,094.00

4,658.00

(ii) Unitemized

1,007.00

4,724.00

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

5,101.00

9,382.00

(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).....▶

5,101.00

9,382.00

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).....

10.69

15.87

(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)).....▶

5,111.69

9,397.87

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

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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..... | | |
| 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)).. | -0- | -0- |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | | |

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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)
- 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)

| |
|----------|
| 5,101.00 |
| |
| 5,101.00 |
| |
| |
| |
| |

| |
|----------|
| 9,382.00 |
| |
| 9,382.00 |
| |
| |
| |
| |

26038951435

**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 | OF |
| <input type="checkbox"/> 11a 13 | <input type="checkbox"/> 11b 14 | <input type="checkbox"/> 11c 15 | <input type="checkbox"/> 12 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)

A.O. SMITH POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
BEDNAR, RANDY

Mailing Address
801 N. PONDEROSA DR

City **HARTLAND** State **WI** Zip Code **53029**

FEC ID number of contributing federal political committee: **000104687**

Name of Employer **A.O. Smith** Occupation **VP Information Service**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date **30000**

Date of Receipt
 / /

Amount of Each Receipt this Period
 150.00

*Payroll Deduction
25 per Month*

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

Mailing Address
4889 Highway H West

City **Kewaskum** State **WI** Zip Code **53040**

FEC ID number of contributing federal political committee: **000104687**

Name of Employer **A.O. Smith** Occupation **Section Manager**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date **24000**

Date of Receipt
 / /

Amount of Each Receipt this Period
 120.00

*Payroll Deduction
20 per Month*

C. Full Name (Last, First, Middle Initial)
Heinrich, Donald M

Mailing Address
1210 Wind Field Court

City **Dayton** State **OH** Zip Code **45458**

FEC ID number of contributing federal political committee: **000104687**

Name of Employer **A.O. Smith** Occupation **President EPC**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date **24000**

Date of Receipt
 / /

Amount of Each Receipt this Period
 120.00

*Payroll Deduction
20 per Month*

SUBTOTAL of Receipts This Page (optional) **39000**

TOTAL This Period (last page this line number only)

26038951436

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

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NAME OF COMMITTEE (In Full)
A. O. Smith Political Action Committee

A. Full Name (Last, First, Middle Initial)
Hudgel James

Mailing Address
97 Hicklen Way Court

City
Hickersonville TN 37025

FEC ID number of contributing federal political committee.
C00104687

Name of Employer
A. O. Smith

Occupation
Director of Logistics Dist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
10 / 15 / 2005

Amount of Each Receipt this Period
200.00

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

Mailing Address
7109 Kingston Rd

City
Fairview TN 37062

FEC ID number of contributing federal political committee.
C00104687

Name of Employer
A. O. Smith

Occupation
VP Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
 [] [] []

Amount of Each Receipt this Period
120.00

*Payroll Deduction
 20 Per Month*

C. Full Name (Last, First, Middle Initial)
Sellers Larry W

Mailing Address
6833 Comstock Rd

City
College Grove TN 37048

FEC ID number of contributing federal political committee.
C00104687

Name of Employer
A. O. Smith

Occupation
VP Manufacturing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
 [] [] []

Amount of Each Receipt this Period
120.00

SUBTOTAL of Receipts This Page (optional) ▶ *440.00*

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

26038951437

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

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NAME OF COMMITTEE (In Full)
O.O. Smith Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mapas Christopher

Mailing Address
7100 Beaverbrook Dr

City *Springboro* State *OH* Zip Code *45066*

FEC ID number of contributing federal political committee.
C00104687

Name of Employer
O.O. Smith Occupation
President AAS Electric

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
10 / 15 / 2005

Amount of Each Receipt this Period
400.00

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

Mailing Address
1698 Autumn Place

City *Brentwood* State *TN* Zip Code *37027*

FEC ID number of contributing federal political committee.
C00104687

Name of Employer
O.O. Smith Occupation
VP Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

Amount of Each Receipt this Period
300.00

*Payroll Deduction
 50 per month*

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

Mailing Address
11731 W. Bridgewater Dr

City *Merion* State *WI* Zip Code *53092*

FEC ID number of contributing federal political committee.
C00104687

Name of Employer
O.O. Smith Occupation
VP Business Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

Amount of Each Receipt this Period
120.00

*Payroll Deduction
 20 per month*

SUBTOTAL of Receipts This Page (optional) *820.00*

TOTAL This Period (last page this line number only) *820.00*

26038951438

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

| | | | | | |
|------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|
| FOR LINE NUMBER: | | PAGE | | OF | |
| <input 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"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
A.O. Smith Political Action Committee

A. Full Name (Last, First, Middle Initial)
Romoser W. David

Mailing Address
11019 N Wynngate Trl

City *Mequon* State *WI* Zip Code *53092-5004*

FEC ID number of contributing federal political committee.

Name of Employer
A.O. Smith Occupation
VP General Counsel & Sec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Amount of Each Receipt this Period

*Payroll Collection
 20 Per Month*

B. Full Name (Last, First, Middle Initial)
Sherman Jack Jr

Mailing Address
P.O. Box 556

City *Cashland City* State *TN* Zip Code *37015*

FEC ID number of contributing federal political committee.

Name of Employer
A.O. Smith Occupation
VP Information Svc

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Amount of Each Receipt this Period

*Payroll Collection
 20 Per Month*

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

Mailing Address
9624 N. Sunlight Lane

City *Mequon* State *WI* Zip Code *53092*

FEC ID number of contributing federal political committee.

Name of Employer
A.O. Smith Occupation
Manager Public Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Amount of Each Receipt this Period

*Payroll Collection
 54 Per Month*

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

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

26038951439

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

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NAME OF COMMITTEE (In Full)
A.O. Smith Political Action Committee

A. Full Name (Last, First, Middle Initial)
Bilum, Terry A.

Mailing Address
8200 Wickle Rd, East

City *Brentwood* State *TN* Zip Code *37027*

FEC ID number of contributing federal political committee.
C00104687

Name of Employer
A.O. Smith Occupation
VP Nat'l Accounts

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
07 / 15 / 2005

Amount of Each Receipt this Period
250.00

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

Mailing Address
384 Bayshore Dr

City *Hendersonville* State *TN* Zip Code *37075*

FEC ID number of contributing federal political committee.
C00104687

Name of Employer
A.O. Smith Occupation
VP Retail Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
07 / 15 / 2005

Amount of Each Receipt this Period
300.00

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

Mailing Address
19 Winged Foot Dr

City *Martinez* State *GA* Zip Code *30109*

FEC ID number of contributing federal political committee.
C00104687

Name of Employer
A.O. Smith Occupation
President AOSmith Water

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
09 / 15 / 2005

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional).....▶ *750.00*

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

26038951440

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

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NAME OF COMMITTEE (In Full)
P.O. Smith Political Action Committee

A. Full Name (Last, First, Middle Initial)
Watts Franklin P.

Mailing Address
1275 Crest Dr.

City *Hartsville* State *SC* Zip Code *29550*

FEC ID number of contributing federal political committee.
C00104687

Name of Employer
P.O. Smith Occupation
Manager Paint & Crowley

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period
120.00

*Payroll Deduction
20 per month*

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
MM / DD / YYYY

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
MM / DD / YYYY

Amount of Each Receipt this Period


SUBTOTAL of Receipts This Page (optional) *120.00*

TOTAL This Period (last page this line number only) *3,024.00*

26038951441

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) 1/12/06 |
| <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 |


 PREPARER
 (3/2005)

1/19/06
 DATE PREPARED

26038951442