**FEC FORM 3**

# REPORT OF RECEIPTS AND DISBURSEMENTS

**For An Authorized Committee**

SECRETARY OF THE SENATE
06 APR 19 AM 10: 49
Office Use Only

1. NAME OF COMMITTEE (In full) — USE FEC MAILING LABEL OR TYPE OR PRINT ▼ — Example: If typing, type over the lines

CITIZENS FOR HARKIN

ADDRESS (number and street) ▼ P O BOX 811

☐ Check if different than previously reported. (ACC)

DES MOINES | IA | 50304

2. FEC IDENTIFICATION NUMBER ▼ C00166827

CITY ▲ STATE ▲ ZIP CODE ▲

3. IS THIS REPORT ☒ NEW (N) OR ☐ AMENDED (A)

STATE ▼ DISTRICT: IA 00

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)
- ☐ Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
☐ Convention (12C) ☐ Special (12S)

Election on ☐ ☐ ☐ in the State of ☐

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

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

Election on ☐ ☐ ☐ in the State of ☐

5. Covering Period 01 01 2006 through 03 31 2006

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 Theresa L Kehoe

Signature of Treasurer Theresa L Kehoe Date 04 14 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.

| Office Use Only | | | | | | | |
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(Revised 02/2003)