

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
The Hawkeye PAC

ADDRESS (number and street) PO Box 7255
 Check if different than previously reported. (ACC)
Des Moines IA 50309

2. **FEC IDENTIFICATION NUMBER** C00379479
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 Quarterly 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 (12G)
Election on _____ in the State of _____
(d) 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 Gina Noll

Signature of Treasurer Electronically Filed by Gina Noll Date 01 30 2007

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**

Write or Type Committee Name
The Hawkeye PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		389364.90
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	389364.90									
(c) Total Receipts (from Line 19)	81250.00	81250.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	470614.90	470614.90								
7. Total Disbursements (from Line 31)	123754.97	123754.97								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	346859.93	346859.93								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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**

Write or Type Committee Name
The Hawkeye PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	6

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)	14750.00	14750.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	14750.00	14750.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	66500.00	66500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	81250.00	81250.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	81250.00	81250.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	81250.00	81250.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	24754.97	24754.97
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	24754.97	24754.97
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	96000.00	96000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	3000.00	3000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	3000.00	3000.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	123754.97	123754.97
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	123754.97	123754.97

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)	81250.00	81250.00
34. Total Contribution Refunds (from Line 28(d))	3000.00	3000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	78250.00	78250.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	24754.97	24754.97
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	24754.97	24754.97

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 27
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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	

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NAME OF COMMITTEE (In Full)
The Hawkeye PAC

Full Name (Last, First, Middle Initial) A. Aegon Usa Inc PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 4 / 2 0 0 6	
Mailing Address 1111 North Charles Street		Transaction ID: 60508.C327	
City State Zip Code Baltimore MD 21201	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C C00236414	Receipt		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Americas Community Bankers Community		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 4 / 2 0 0 6	
Mailing Address Campaign Committee 900 19th Street Nw Suite 400		Transaction ID: 60508.C15	
City State Zip Code Washington DC 20006	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C C00001875	Receipt		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. American Council Of Life Insurers PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 6	
Mailing Address 101 Constitution Avenue Nw Suite 700 West		Transaction ID: 60508.C275	
City State Zip Code Washington DC 20001	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. C C00147066	Receipt		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	4000.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 27
	(check only one)
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input checked="" 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	

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NAME OF COMMITTEE (In Full)
The Hawkeye PAC

Full Name (Last, First, Middle Initial) A. American Family Mutual Insurance Company		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2006
Mailing Address Federal PAC 6000 American Parkway		Transaction ID: 60508.C840
City Madison	State WI	Zip Code 53783
Amount of Each Receipt this Period 1000.00		Receipt
FEC ID number of contributing federal political committee. C C00354290		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. American Physical Therapy Association		Date of Receipt M M / D D / Y Y Y Y 03 / 14 / 2006
Mailing Address Physical Therapy PAC 1111 N. Fairfax Street		Transaction ID: 60508.C10
City Alexandria	State VA	Zip Code 22314
Amount of Each Receipt this Period 5000.00		Receipt
FEC ID number of contributing federal political committee. C C00012880		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. American Podiatric Medical Association		Date of Receipt M M / D D / Y Y Y Y 02 / 28 / 2006
Mailing Address Inc. Podiatry PAC 9312 Old Georgetown Road		Transaction ID: 60508.C398
City Bethesda	State MD	Zip Code 20814
Amount of Each Receipt this Period 2500.00		Receipt
FEC ID number of contributing federal political committee. C C00008839		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

SUBTOTAL of Receipts This Page (optional) ▶	8500.00
TOTAL This Period (last page this line number only) ▶	_____

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 27
	(check only one)
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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

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NAME OF COMMITTEE (In Full)
The Hawkeye PAC

Full Name (Last, First, Middle Initial) A. Beverly Enterprises Inc. PAC		Date of Receipt M M / D D / Y Y Y Y 03 / 14 / 2006	
Mailing Address 1250 H Street Nw Suite 555		Transaction ID: 60508.C232	
City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C C00346346		Receipt	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) B. Bikes Belong Coalition Ltd. PAC		Date of Receipt M M / D D / Y Y Y Y 01 / 27 / 2006	
Mailing Address 1245 Pearl St. Suite 200		Transaction ID: 60508.C830	
City State Zip Code Boulder CO 80302	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C C00372862		Receipt	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) C. Building Our Bases (bobs) PAC		Date of Receipt M M / D D / Y Y Y Y 03 / 14 / 2006	
Mailing Address 228 S. Washington St. Ste. 115		Transaction ID: 60508.C762	
City State Zip Code Alexandria VA 22314	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C C00334904		Receipt	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional) ▶	7000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 27
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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

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NAME OF COMMITTEE (In Full)
The Hawkeye PAC

A. Full Name (Last, First, Middle Initial) Hartford Financial Services Group Inc.		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2006	
Mailing Address Advocates Fund PAC Hartford Plaza		Transaction ID: 60508.C134	
City Hartford State CT Zip Code 06115	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C C00168864		Receipt	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

B. Full Name (Last, First, Middle Initial) Healthsouth Corporation PAC		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2006	
Mailing Address One Healthsouth Parkway		Transaction ID: 60508.C797	
City Birmingham State AL Zip Code 35243	Amount of Each Receipt this Period 1500.00		
FEC ID number of contributing federal political committee. C C00414649		Receipt	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 1500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

C. Full Name (Last, First, Middle Initial) Hewlett Packard Company PAC		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2006	
Mailing Address 3000 Hanover Street MS 1035		Transaction ID: 60508.C619	
City Palo Alto State CA Zip Code 94304	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C C00196725		Receipt	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	7500.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 27
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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

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NAME OF COMMITTEE (In Full)
The Hawkeye PAC

A. Full Name (Last, First, Middle Initial) Ing America Insurance Holdings Inc. PAC		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 4 / 2 0 0 6	
Mailing Address 151 Farmington Avenue - Ts31 Legal P-3		Transaction ID: 60508.C690	
City State Zip Code Hartford CT 06156		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <input checked="" type="checkbox"/> C C00184028		Receipt	
Name of Employer Occupation		Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

B. Full Name (Last, First, Middle Initial) Kindred Healthcare Inc. PAC		Date of Receipt M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6	
Mailing Address 680 South Fourth Avenue One Vencor Place		Transaction ID: 60508.C837	
City State Zip Code Louisville KY 40202		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <input checked="" type="checkbox"/> C C00242271		Receipt	
Name of Employer Occupation		Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

C. Full Name (Last, First, Middle Initial) Massachusetts Mutual Life Insurance		Date of Receipt M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6	
Mailing Address Company PAC 1295 State Street		Transaction ID: 60508.C610	
City State Zip Code Springfield MA 01111		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <input checked="" type="checkbox"/> C C00118943		Receipt	
Name of Employer Occupation		Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	7000.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 27		
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
The Hawkeye PAC

Full Name (Last, First, Middle Initial) A. Metlife Inc. Employees Political		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2006	
Mailing Address Participation Fund 27-01 Queens Plaza North		Transaction ID: 60508.C167	
City Long Island City	State NY	Zip Code 11101	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C C00040923		Receipt	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) B. Mortgage Bankers Assoc. Of America PAC		Date of Receipt M M / D D / Y Y Y Y 03 / 14 / 2006	
Mailing Address 1919 Pennsylvania Avenue NW 8th Floor		Transaction ID: 60508.C147	
City Washington	State DC	Zip Code 20006	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C C00004812		Receipt	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) C. Mutual Of Omaha Companies Pac (impac)		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2006	
Mailing Address Mutual Of Omaha Plaza		Transaction ID: 60508.C150	
City Omaha	State NE	Zip Code 68175	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C C00094581		Receipt	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional) ▶	7000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 27
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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

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NAME OF COMMITTEE (In Full)
The Hawkeye PAC

Full Name (Last, First, Middle Initial) A. National Structured Settlements Trade		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2006	
Mailing Address Association PAC 1800 K St. Nw Suite 718		Transaction ID: 60508.C439	
City Washington State DC Zip Code 20006	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C C00219444		Receipt	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Natso Inc. PAC		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2006	
Mailing Address 1737 King Street Ste. 200		Transaction ID: 60508.C409	
City Alexandria State VA Zip Code 22314	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C C00097865		Receipt	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. New York Life Insurance Co. PAC		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2006	
Mailing Address 51 Madison Ave. Room 1109		Transaction ID: 60508.C178	
City New York State NY Zip Code 10010	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C C00158881		Receipt	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 5000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	11000.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 27
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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	

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NAME OF COMMITTEE (In Full)
The Hawkeye PAC

Full Name (Last, First, Middle Initial) A. Northwestern Mutual Life Ins. Co. PAC		Date of Receipt M M / D D / Y Y Y Y 03 / 14 / 2006	
Mailing Address 720 E. Wisconsin Ave.		Transaction ID: 60508.C258	
City State Zip Code Milwaukee WI 53202	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C C00197095		Receipt	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Pacific Life Insurance Company PAC		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2006	
Mailing Address 700 Newport Center Drive		Transaction ID: 60508.C667	
City State Zip Code Newport Beach CA 92660	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C C00068528		Receipt	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Political Action Committee of the		Date of Receipt M M / D D / Y Y Y Y 03 / 17 / 2006	
Mailing Address American Assoc. of Orthopaedic Sur 317 Massachusetts Avenue Ne		Transaction ID: 60508.C154	
City State Zip Code Washington DC 20002	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C C00343137		Receipt	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 2500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	4500.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 27
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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	

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NAME OF COMMITTEE (In Full)
The Hawkeye PAC

Full Name (Last, First, Middle Initial) A. Principal Life Insurance Company PAC		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2006
Mailing Address 711 High Street Government Relations		Transaction ID: 60508.C83
City Des Moines State IA Zip Code 50392	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C C00128918		Receipt
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. Siebel Systems Inc Egovernment PAC		Date of Receipt M M / D D / Y Y Y Y 01 / 31 / 2006
Mailing Address 2207 Bridgepointe Parkway		Transaction ID: 60508.C818
City San Mateo State CA Zip Code 94404	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00364711		Receipt
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. Targetcitizens Political Forum		Date of Receipt M M / D D / Y Y Y Y 03 / 14 / 2006
Mailing Address 1000 Nicollet Mall TPS 3275		Transaction ID: 60508.C336
City Minneapolis State MN Zip Code 55403	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00098061		Receipt
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶	8000.00
TOTAL This Period (last page this line number only) ▶	(Empty field)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 15 / 27
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

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NAME OF COMMITTEE (In Full)
The Hawkeye PAC

A. Full Name (Last, First, Middle Initial)
Wine & Spirits Wholesalers America PAC

Mailing Address 805 Fifteenth St Nw Suite 430

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00147173

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2006

Transaction ID: 60508.C171

Amount of Each Receipt this Period
1000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Winston & Strawn LLP PAC

Mailing Address 1700 K St Nw

City State Zip Code
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00282921

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2006

Transaction ID: 60508.C831

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	2000.00
TOTAL This Period (last page this line number only)	▶	66500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
The Hawkeye PAC

A. Full Name (Last, First, Middle Initial)
Donald Alexander

Mailing Address 1333 New Hampshire Ave Nw

City Washington State DC Zip Code 20036

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

Name of Employer Akin Gump Strauss Hauer & Feld Occupation Lawyer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
02 / 28 / 2006

Transaction ID: 60508.C730

Amount of Each Receipt this Period
500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Charles Allen

Mailing Address 2260 Bluff Ct

City Cedar Hill State TX Zip Code 75104

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

Name of Employer Triumph Occupation President/ceo

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
03 / 14 / 2006

Transaction ID: 60508.C836

Amount of Each Receipt this Period
2000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Mark Disler

Mailing Address 240 Congressional Lane

City Rockville State MD Zip Code 20852

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

Name of Employer Bksh And Associates Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 14 / 2006

Transaction ID: 60508.C832

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	2750.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
The Hawkeye PAC

A. Full Name (Last, First, Middle Initial)
Frank Fritsch

Mailing Address 14 South Watch Lane

City State Zip Code
Mechanicsburg PA 17050

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

Name of Employer Select Medical Corp Occupation Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2006

Transaction ID: 60508.C838

Amount of Each Receipt this Period
1000.00

Receipt

B. Full Name (Last, First, Middle Initial)
J. Rod Lauffin

Mailing Address 2005 West Bourne Way

City State Zip Code
Alpharetta GA 30022

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

Name of Employer Regency Occupation President/ceo

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2006

Transaction ID: 60508.C835

Amount of Each Receipt this Period
2000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Robert Ortenzio

Mailing Address Po Box 2034

City State Zip Code
Mechanicsburg PA 17055

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

Name of Employer Select Medical Corp Occupation Ceo

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2006

Transaction ID: 60508.C833

Amount of Each Receipt this Period
1500.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	4500.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 27
	<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	

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NAME OF COMMITTEE (In Full)
The Hawkeye PAC

Full Name (Last, First, Middle Initial) A. Robert Ortenzio		Date of Receipt M M / D D / Y Y Y Y Y 03 / 14 / 2006	
Mailing Address 7 Westwind Drive		Transaction ID: 60508.C839	
City State Zip Code Lemoyne PA 17043	Amount of Each Receipt this Period 1500.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 1500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Mississippi In Iowa Sac & Fox Tribe Of T		Date of Receipt M M / D D / Y Y Y Y Y 03 / 14 / 2006	
Mailing Address 349 Meskwaki Rd		Transaction ID: 60508.C184	
City State Zip Code Tama IA 52339	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Tribe Occupation N/a	Aggregate Year-to-Date ▼ 5000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Michael Tarvin		Date of Receipt M M / D D / Y Y Y Y Y 03 / 14 / 2006	
Mailing Address 140 Winfield Drive		Transaction ID: 60508.C834	
City State Zip Code Camp Hill PA 17011	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Select Medical Corp Occupation Executive	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	7500.00
TOTAL This Period (last page this line number only) ▶	14750.00

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 19 / 27

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
The Hawkeye PAC

Full Name (Last, First, Middle Initial) A. Aristotle International		Transaction ID: 60508.E195 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 6
Mailing Address 205 Pennsylvania Ave Se		Amount of Each Disbursement this Period 3900.00
City Washington State DC Zip Code 20003-	Purpose of Disbursement SOFTWARE Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SOFTWARE

Full Name (Last, First, Middle Initial) B. Catering By Windows		Transaction ID: 60508.E196 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address 1125 N Royal St		Amount of Each Disbursement this Period 292.32
City Alexandria State VA Zip Code 22314-	Purpose of Disbursement CATERING FOR EVENT Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	CATERING FOR EVENT

Full Name (Last, First, Middle Initial) C. Hoffman Consulting		Transaction ID: 60508.E191 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 6
Mailing Address 3905 Sylvian Avenue		Amount of Each Disbursement this Period 16731.65
City Sioux City State IA Zip Code 51104-1325	Purpose of Disbursement FUNDRAISING FEE Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FUNDRAISING FEE

SUBTOTAL of Disbursements This Page (optional) ▶	20923.97
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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 20 / 27

<input checked="" 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 type="checkbox"/>	29	<input type="checkbox"/>	30b

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NAME OF COMMITTEE (In Full)
The Hawkeye PAC

Full Name (Last, First, Middle Initial) A. Capital Knowledge Consulting		Transaction ID: 60508.E39 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 6	
Mailing Address Po Box 7255		Amount of Each Disbursement this Period 3825.00	
City Des Moines State IA Zip Code 50309-	Purpose of Disbursement BOOKKEEPING	Category/ Type BOOKKEEPING	
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)	3825.00
TOTAL This Period (last page this line number only)	24748.97

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
The Hawkeye PAC

Full Name (Last, First, Middle Initial) A. Citizens For Bunning		Transaction ID: 70130.E490 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 6
Mailing Address 1717 Dixie Highway Suite 180		Amount of Each Disbursement this Period 5000.00
City Ft Wright State KY Zip Code 41011-	Category/ Type	
Purpose of Disbursement		
Candidate Name JIM BUNNING		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 00	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Friends Of Conrad Burns - 2006		Transaction ID: 60508.E199 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address Po Box 1596		Amount of Each Disbursement this Period 5000.00
City Helena State MT Zip Code 59624-	Category/ Type	
Purpose of Disbursement		
Candidate Name CONRAD BURNS		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ P-2006	

Full Name (Last, First, Middle Initial) C. Friends Of Conrad Burns - 2006		Transaction ID: 60508.E200 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address Po Box 1596		Amount of Each Disbursement this Period 5000.00
City Helena State MT Zip Code 59624-	Category/ Type	
Purpose of Disbursement		
Candidate Name CONRAD BURNS		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ G-2006	

SUBTOTAL of Disbursements This Page (optional) ▶	15000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
The Hawkeye PAC

Full Name (Last, First, Middle Initial) A. Chafee For Senate		Transaction ID: 60508.E201 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address Po Box 7329		Amount of Each Disbursement this Period 5000.00
City Warwick State RI Zip Code 02887-		
Purpose of Disbursement	Category/Type	
Candidate Name LINCOLN D CHAFEE		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ P-2006	

Full Name (Last, First, Middle Initial) B. Chafee For Senate		Transaction ID: 60508.E202 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address Po Box 7329		Amount of Each Disbursement this Period 5000.00
City Warwick State RI Zip Code 02887-		
Purpose of Disbursement	Category/Type	
Candidate Name LINCOLN D CHAFEE		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ G-2006	

Full Name (Last, First, Middle Initial) C. Mike Dewine For Us Senate		Transaction ID: 60508.E203 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address Po Box 340188		Amount of Each Disbursement this Period 5000.00
City Columbus State OH Zip Code 43234-		
Purpose of Disbursement	Category/Type	
Candidate Name RICHARD MICHAEL DEWINE		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ P-2006	

SUBTOTAL of Disbursements This Page (optional) ▶	15000.00
TOTAL This Period (last page this line number only) ▶

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 23 / 27

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
The Hawkeye PAC

Full Name (Last, First, Middle Initial) A. Mike Dewine For Us Senate		Transaction ID: 60508.E204 Date of Disbursement 03 / 16 / 2006	
Mailing Address Po Box 340188		Amount of Each Disbursement this Period 5000.00	
City Columbus	State OH		Zip Code 43234-
Purpose of Disbursement			Category/ Type
Candidate Name RICHARD MICHAEL DEWINE			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ G-2006	State: OH District: 00	

Full Name (Last, First, Middle Initial) B. Tom Kean For Us Senate Inc		Transaction ID: 60508.E207 Date of Disbursement 03 / 22 / 2006	
Mailing Address Po Box 225		Amount of Each Disbursement this Period 5000.00	
City Colonia	State NJ		Zip Code 07067-
Purpose of Disbursement			Category/ Type
Candidate Name THOMAS H JR KEAN			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ P-2006	State: NJ District: 00	

Full Name (Last, First, Middle Initial) C. Mark Kennedy For Congress		Transaction ID: 60508.E117 Date of Disbursement 03 / 16 / 2006	
Mailing Address Po Box 49333		Amount of Each Disbursement this Period 5000.00	
City Blaine	State MN		Zip Code 55449-
Purpose of Disbursement			Category/ Type
Candidate Name MARK RAYMOND KENNEDY			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ P-2006	State: MN District: 06	

SUBTOTAL of Disbursements This Page (optional) ▶	15000.00
TOTAL This Period (last page this line number only) ▶

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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
The Hawkeye PAC

Full Name (Last, First, Middle Initial) A. Mark Kennedy For Congress		Transaction ID: 60508.E118 Date of Disbursement 03 / 16 / 2006	
Mailing Address Po Box 49333		Amount of Each Disbursement this Period 5000.00	
City Blaine State MN Zip Code 55449-	Purpose of Disbursement		
Candidate Name MARK RAYMOND KENNEDY			Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ G-2006		

Full Name (Last, First, Middle Initial) B. Lamberti For Congress		Transaction ID: 60508.E206 Date of Disbursement 03 / 22 / 2006	
Mailing Address PO Box 785		Amount of Each Disbursement this Period 5000.00	
City Ankeny State IA Zip Code 50021-	Purpose of Disbursement		
Candidate Name JEFFREY LAMBERTI			Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 3	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ P-2006		

Full Name (Last, First, Middle Initial) C. Lamberti For Congress		Transaction ID: 60508.E205 Date of Disbursement 03 / 22 / 2006	
Mailing Address PO Box 785		Amount of Each Disbursement this Period 5000.00	
City Ankeny State IA Zip Code 50021-	Purpose of Disbursement		
Candidate Name JEFFREY LAMBERTI			Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 3	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ G-2006		

SUBTOTAL of Disbursements This Page (optional) ▶	15000.00
TOTAL This Period (last page this line number only) ▶	[]

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
The Hawkeye PAC

Full Name (Last, First, Middle Initial) A. Santorum 2006 Inc		Transaction ID: 60508.E197 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address One Tower Bridge Suite 1440		Amount of Each Disbursement this Period 5000.00
City West Conshohocken State PA Zip Code 19428-	Category/ Type	
Purpose of Disbursement		
Candidate Name RICHARD J SANTORUM		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ P-2006	

Full Name (Last, First, Middle Initial) B. Santorum 2006 Inc		Transaction ID: 60508.E198 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address One Tower Bridge Suite 1440		Amount of Each Disbursement this Period 5000.00
City West Conshohocken State PA Zip Code 19428-	Category/ Type	
Purpose of Disbursement		
Candidate Name RICHARD J SANTORUM		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ G-2006	

Full Name (Last, First, Middle Initial) C. Talent For Senate Committee		Transaction ID: 60508.E22 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address 9378 Olive Blvd #206		Amount of Each Disbursement this Period 5000.00
City St Louis State MO Zip Code 63132-	Category/ Type	
Purpose of Disbursement		
Candidate Name JAMES MATTHES TALENT		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ P-2006	

SUBTOTAL of Disbursements This Page (optional) ▶	15000.00
TOTAL This Period (last page this line number only) ▶	[]

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
The Hawkeye PAC

Full Name (Last, First, Middle Initial) A. Talent For Senate Committee		Transaction ID: 60508.E23 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address 9378 Olive Blvd #206		Amount of Each Disbursement this Period 5000.00
City St Louis State MO Zip Code 63132-	Category/ Type	
Purpose of Disbursement Candidate Name JAMES MATTHES TALENT		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 00 Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ G-2006		

Full Name (Last, First, Middle Initial) B. National Republican Senatorial Committee		Transaction ID: 60508.E20 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address 425 Second Street Ne		Amount of Each Disbursement this Period 15000.00
City Washington State DC Zip Code 20002-	Category/ Type	
Purpose of Disbursement CONTRIBUTION Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ P-2006		

Full Name (Last, First, Middle Initial) C. Republican Party Of Iowa And Its Eisenho		Transaction ID: 60508.E208 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 7 / 2 0 0 6
Mailing Address 621 East 9th St		Amount of Each Disbursement this Period 1000.00
City Des Moines State IA Zip Code 50309-	Category/ Type	
Purpose of Disbursement CONTRIBUTION Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ P-2006		

SUBTOTAL of Disbursements This Page (optional) ▶	21000.00
TOTAL This Period (last page this line number only) ▶	96000.00

**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)

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<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 checked="" type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
The Hawkeye PAC

Full Name (Last, First, Middle Initial)

A. Dealers Election Action Committee Of The

Mailing Address National Automotive Dealers Associ
8400 Westpark Drive

City Mclean State VA Zip Code 22102-

Purpose of Disbursement
Refund of Contribution refund of excess

Candidate Name

010
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 60508.E137

Date of Disbursement

01 / 10 / 2006

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

3000.00