



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Nebraska Credit Union League Political Action Committee

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, <u>2006</u>		<u>9,493.51</u>
(b) Cash on Hand at Beginning of Reporting Period.....	<u>18,968.25</u>	
(c) Total Receipts (from Line 18).....	<u>7,630.15</u>	<u>17,104.89</u>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<u>26,598.40</u>	<u>26,598.40</u>
7. Total Disbursements (from Line 31).....	<u>17,521.00</u>	<u>17,521.00</u>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<u>9,077.40</u>	<u>9,077.40</u>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<u>0.00</u>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<u>0.00</u>	

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

20038961804

**DETAILED SUMMARY PAGE  
of Receipts**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

Nebraska Credit Union League Political Action Committee

Report Covering the Period: From:

07 / 01 / 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).....	4,928.20	7,372.00
(ii) Unitemized.....	2,671.19	9,683.43
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	7,599.39	17,055.43
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	7,599.39	17,055.43
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.).....	307.6	494.6
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 Transfers (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)).....▶	7,630.15	17,104.89
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	7,630.15	17,104.89

**DETAILED SUMMARY PAGE  
of Disbursements**

FEC Form 3X (Rev. 02/2003)

Page 4

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 .....	000	000
(ii) Non-Federal Share.....	000	000
(b) Other Federal Operating Expenditures .....	2100	2100
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	2100	2100
22. Transfers to Affiliated/Other Party Committees.....	1750000	1750000
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	000	000
24. Independent Expenditures (use Schedule E) .....	000	000
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F) .....	000	000
26. Loan Repayments Made.....	000	000
27. Loans Made.....	000	000
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	000	000
(b) Political Party Committees .....	000	000
(c) Other Political Committees (such as PACs).....	000	000
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	000	000
29. Other Disbursements .....	000	000
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	000	000
(ii) "Levin" Share .....	000	000
(b) Federal Election Activity Paid Entirely With Federal Funds .....	000	000
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).....	000	000
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1752100	1752100
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1752100	1752100

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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) .....	759939	1705543
34. Total Contribution Refunds (from Line 28(d)) .....	000	000
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	759939	1705543
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	2100	2100
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	000	000
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	000	000

26038961807



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

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

FOR LINE NUMBER: PAGE 1 OF 6  
(check only one)

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

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. **Uden, Mark**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: **14510 F St. Suite 201**  
 City: **Omaha** State: **NE** Zip Code: **68137**  
 Date of Receipt: **12/31/2005**  
 Amount of Each Receipt this Period: **250.00**  
 FEC ID number of contributing federal political committee: **C**  
 Name of Employer: **Mutual 1<sup>st</sup> Federal** Occupation: **President**  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date: **250.00**

B. **Eikenberry, Amy**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address: **1605 S. 93 St.**  
 City: **Omaha** State: **NE** Zip Code: **68124**  
 Date of Receipt: **12/31/2005**  
 Amount of Each Receipt this Period: **250.00**  
 FEC ID number of contributing federal political committee: **C**  
 Name of Employer: **Metro Health Services FCU** Occupation: **VP**  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date: **250.00**

C. ~~Full Name (Last, First, Middle Initial)~~  
~~Mailing Address~~  
~~City State Zip Code~~  
~~Date of Receipt~~  
~~Amount of Each Receipt this Period~~  
~~FEC ID number of contributing federal political committee~~  
~~Name of Employer~~  
~~Occupation~~  
~~Receipt For: Primary General Other (specify)~~  
~~Aggregate Year-to-Date~~

SUBTOTAL of Receipts This Page (optional) ▶

**500.00**

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

26038861808

**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 <b>2</b> OF <b>6</b>	
<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"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)

**Nebraska Credit Union League Political Action Committee**

**A. Sullivan, J. Scott**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
**16617 Oak Street**  
 City State Zip Code  
**Omaha NE 68130**  
 FEC ID number of contributing federal political committee.  
**C**  
 Name of Employer  
**NE Credit Union League** Occupation  
**President/CEO**  
 Receipt For:  
 Primary  General  
 Other (specify)  Aggregate Year-to-Date **52000**

Date of Receipt  
**12 30 2005**  
 Amount of Each Receipt this Period  
**28000**

**B. Luetkenbau, Branden**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
**7223 S. 176 St.**  
 City State Zip Code  
**Omaha NE 68136**  
 FEC ID number of contributing federal political committee.  
**C**  
 Name of Employer  
**NE Credit Union League** Occupation  
**Govt Affairs Dir.**  
 Receipt For:  
 Primary  General  
 Other (specify)  Aggregate Year-to-Date **25000**

Date of Receipt  
**12 30 2005**  
 Amount of Each Receipt this Period  
**25000**

**C. Lane, Kathi**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
**14510 F St., Ste. 201**  
 City State Zip Code  
**Omaha NE 68137**  
 FEC ID number of contributing federal political committee.  
**C**  
 Name of Employer  
**Mutual 1<sup>st</sup> Federal** Occupation  
**VP**  
 Receipt For:  
 Primary  General  
 Other (specify)  Aggregate Year-to-Date **25000**

Date of Receipt  
**12 30 2005**  
 Amount of Each Receipt this Period  
**25000**

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

**780.00**

601960002

**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 <b>3</b> OF <b>6</b>
	<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)  
**Nebraska Credit Union League Political Action Committee**

**A. Hemmingsen, Tray**

Full Name (Last, First, Middle Initial)

Mailing Address  
**1910 S. 44th St.**

City **Omaha** State **NE** Zip Code **68105**

Date of Receipt  
**12 30 2005**

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

Amount of Each Receipt this Period  
**25000**

Name of Employer **Metro Health Services FCU** Occupation **Vice President**

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

Aggregate Year-to-Date **25000**

**B. Kelly, Jeff**

Full Name (Last, First, Middle Initial)

Mailing Address  
**2044 S. 199th St.**

City **Omaha** State **NE** Zip Code **68130**

Date of Receipt  
**12 30 2005**

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

Amount of Each Receipt this Period  
**25000**

Name of Employer **Metro Health Services FCU** Occupation **Branch Manager**

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

Aggregate Year-to-Date **25000**

**C. Kinder, Nikki**

Full Name (Last, First, Middle Initial)

Mailing Address  
**808 Kended Drive**

City **Omaha** State **NE** Zip Code **68046**

Date of Receipt  
**12 30 2005**

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

Amount of Each Receipt this Period  
**25000**

Name of Employer **Metro Health Services FCU** Occupation **Manager**

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

Aggregate Year-to-Date **25000**

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

TOTAL This Period (last page this line number only)

26038861810



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

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

FOR LINE NUMBER: PAGE **4** OF **6**

(check only one)

<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"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Nebraska Credit Union League Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Koch, Randy</b>		Date of Receipt <b>12 / 30 / 2005</b>
Mailing Address <b>1910 S. 44th St.</b>		Amount of Each Receipt this Period <b>25000</b>
City <b>Omaha</b>	State Zip Code <b>NE 68106</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>25000</b>
Name of Employer <b>Metro Health Services FCU</b>	Occupation <b>Manager</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>25000</b>	

Full Name (Last, First, Middle Initial) <b>B. Krepela, Judy</b>		Date of Receipt <b>12 / 30 / 2005</b>
Mailing Address <b>8617 Templeton Drive</b>		Amount of Each Receipt this Period <b>25000</b>
City <b>Omaha</b>	State Zip Code <b>NE 68134</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>25000</b>
Name of Employer <b>Metro Health Services FCU</b>	Occupation <b>Manager</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>25000</b>	

Full Name (Last, First, Middle Initial) <b>C. Rebhuhn, Edie</b>		Date of Receipt <b>12 / 30 / 2005</b>
Mailing Address <b>5505 S. 104 Circle</b>		Amount of Each Receipt this Period <b>25000</b>
City <b>Omaha</b>	State Zip Code <b>NE 68127</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>25000</b>
Name of Employer <b>Metro Health Services FCU</b>	Occupation <b>Manager</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>25000</b>	

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

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

**750,00**

11010088002

**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 5 OF 6	
<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)  
**Nebraska Credit Union League Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. Casey, Menevieve**

Mailing Address  
**1910 S. 44th St.**

City **Omaha** State **NE** Zip Code **68105**

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

Name of Employer **Metro Health Services FCU** Occupation **Business Partnership Dir.**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **50000**

Date of Receipt **12/30/2005**

Amount of Each Receipt this Period **26924**

Full Name (Last, First, Middle Initial)  
**B. Mausbach, Elaine**

Mailing Address  
**1910 S. 44th St.**

City **Omaha** State **NE** Zip Code **68106**

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

Name of Employer **Metro Health Services** Occupation **President**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **100000**

Date of Receipt **12/30/2005**

Amount of Each Receipt this Period **53848**

Full Name (Last, First, Middle Initial)  
**C. Mike McDermott**

Mailing Address  
**1910 S. 44th St.**

City **Omaha** State **NE** Zip Code **68106**

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

Name of Employer **Metro Health Services FCU** Occupation **Vice President**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **100000**

Date of Receipt **12/31/2005**

Amount of Each Receipt this Period **53048**

SUBTOTAL of Receipts This Page (optional) **134620**

TOTAL This Period (last page this line number only) **134620**

20051230

**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 6 OF 6	
<input type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
**Nebraska Credit Union League Political Action Committee**

A. **Suggs, Bobby**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
**4817 Aspen Drive**  
 City **Omaha** State **NE** Zip Code **68157**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer **Metro Health Services FCU** Occupation **VP**  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **25000**

Date of Receipt  
**12 30 2005**  
 Amount of Each Receipt this Period  
**25000**

B. **Hake, Roger**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
**1414 15th St.**  
 City **Columbus** State **NE** Zip Code **68601**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer **NE Energy FCU** Occupation **President**  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **25200**

Date of Receipt  
**10 17 2005**  
 Amount of Each Receipt this Period  
**25200**

C. **Kounkel, Rich**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
**10655 Bedford Ave**  
 City **Omaha** State **NE** Zip Code **68134**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **30000**

Date of Receipt  
**07 08 2005**  
 Amount of Each Receipt this Period  
**30000**

SUBTOTAL of Receipts This Page (optional) **802.00**  
 TOTAL This Period (last page this line number only) **4928.20**

2603090101090997

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

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NAME OF COMMITTEE (In Full)  
**Nebraska Credit Union League Political Action Committee**

**A.** Full Name (Last, First, Middle Initial)  
**CULAC**

Mailing Address  
**601 Pennsylvania Ave. NW Ste. 600**

City **Washington D.C.** State **DC** Zip Code **20004**

Purpose of Disbursement  
**Affiliate Transfer**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) **008**

State: District:

Date of Disbursement  
**12 / 28 / 2005**

Amount of Each Disbursement this Period  
**1750.00**

**B.** Full Name (Last, First, Middle Initial)  
**Metro Health Services FCU**

Mailing Address  
**1910 S. 44th St.**

City **Omaha** State **NE** Zip Code **68106**

Purpose of Disbursement  
**Stop Payment Fee**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) **001**

State: District:

Date of Disbursement  
**12 / 28 / 2005**

Amount of Each Disbursement this Period  
**21.00**

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) **17521.00**

TOTAL This Period (last page this line number only) **17521.00**

26030991014

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 checked="" type="checkbox"/> USPS First Class Mail	Postmarked <i>1-23-06</i>
<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 type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
<i>JmD</i> PREPARER	<i>1-30-06</i> DATE PREPARED

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