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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For 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

Ben Cardin for Senate

ADDRESS (number and street) ▼ PO BOX 21093

[X] Check if different than previously reported. (ACC)

Catonsville MD 21228

2. FEC IDENTIFICATION NUMBER ▼ C00411587

CITY ▲ STATE ▲ ZIP CODE ▲

3. IS THIS REPORT [X] NEW (N) OR [ ] AMENDED (A)

STATE ▼ DISTRICT MD 03

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- [X] 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 Ed Hale

Signature of Treasurer ____ 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.

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FEC FORM 3
(Revised 02/2003)

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