

**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

SECRETARY OF THE SENATE

05 APR 17 PM 2:18

Office Use Only

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

ADDRESS (number and street) **P.O. Box 391**
 Check if different than previously reported. (ACC) **Burlington, VT 05402**

2. FEC IDENTIFICATION NUMBER **C00411330**
 CITY STATE ZIP CODE STATE DISTRICT
Burlington VT 05402 VT
 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)
 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 **Carol Davis**
 Signature of Treasurer **Electronically Filed by Carol Davis** Date **04 12 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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