



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**TERRI PAC**

Report Covering the Period: From: **04 01 2006** To: **06 30 2006**

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <b>2006</b>		<b>6,565.06</b>
(b) Cash on Hand at Beginning of Reporting Period.....	<b>5,105.11</b>	
(c) Total Receipts (from Line 19).....	<b>6,131.12</b>	<b>14,255.33</b>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<b>11,236.23</b>	<b>20,820.39</b>
7. Total Disbursements (from Line 31).....	<b>9,830.53</b>	<b>19,414.69</b>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<b>1,405.70</b>	<b>1,405.70</b>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....		

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

26039130324

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**TERRI PAC**

Report Covering the Period: From: <sup>M M / D D / Y Y Y Y</sup> 04 01 2006 To: <sup>M M / D D / Y Y Y Y</sup> 06 30 2006

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).....	1,800.00	7,204.20
(ii) Unitemized.....	1,831.12	4,551.13
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	3,631.12	11,755.33
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....	2,500.00	2,500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	6,131.12	14,255.33
12. Transfers From Affiliated/Other Party Committees.....		
13. All Loans Received.....		
14. Loan Repayments Received.....		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....		
17. Other Federal Receipts (Dividends, Interest, etc.).....		
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....		
(b) Levin Funds (from Schedule H5).....		
(c) Total Transfers (add 18(a) and 18(b))..		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	6,131.12	14,255.33
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	6,131.12	14,255.33

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**DETAILED SUMMARY PAGE  
of Disbursements**

FEC Form 3X (Rev. 02/2003)

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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 .....		
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures .....		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....		
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1,000.00	3,500.00
24. Independent Expenditures (use Schedule E) .....		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....		
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs).....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....		
29. Other Disbursements .....	8,830.53	15,914.69
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds .....		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	9,830.53	19,414.69
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9,830.53	19,414.69

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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) .....	61,311.12	14,255.33
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	61,311.12	14,255.33
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

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

FOR LINE NUMBER: PAGE 61 OF 63

(check only one)

<input type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 18	<input type="checkbox"/> 17
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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)

TERRI PAC

Full Name (Last, First, Middle Initial) A. BURRIS, MICHAEL			Date of Receipt MM / DD / YYYY 04 / 04 / 2006
Mailing Address 267 LANDINGS BLVD.			Amount of Each Receipt this Period 500.00
City WESTON	State FL	Zip Code 33327	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 500.00
Name of Employer N/A		Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. CROTHERS, PAUL			Date of Receipt MM / DD / YYYY 05 / 25 / 2006
Mailing Address 4567 DIAZ DR.			Amount of Each Receipt this Period 500.00
City FREMONT	State CA	Zip Code 94536	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 500.00
Name of Employer SELF		Occupation ENGINEER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) C. SAMUELS, LEONARD			Date of Receipt MM / DD / YYYY 06 / 26 / 2006
Mailing Address 10461 N. LAKE VISTA CIR.			Amount of Each Receipt this Period 250.00
City DANIE	State FL	Zip Code 33328	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 250.00
Name of Employer		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	1,250.00
TOTAL This Period (last page this line number only).....▶	

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**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 02 OF 03

<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	<input type="checkbox"/>	

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NAME OF COMMITTEE (In Full)

TERRI PAC

Full Name (Last, First, Middle Initial) A. HARVEY, DONNA			Date of Receipt MM / DD / YYYY 05 / 25 / 2006		
Mailing Address 7414 VAN DYKE RD.			Amount of Each Receipt this Period 100.00		
City ODESSA	State FL	Zip Code 33556			
FEC ID number of contributing federal political committee. C					
Name of Employer N/A		Occupation RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00			

Full Name (Last, First, Middle Initial) B. HARVEY, DONNA			Date of Receipt MM / DD / YYYY 04 / 01 / 2006		
Mailing Address 7414 VAN DYKE RD.			Amount of Each Receipt this Period 200.00		
City ODESSA	State FL	Zip Code 33556			
FEC ID number of contributing federal political committee. C					
Name of Employer N/A		Occupation RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00			

Full Name (Last, First, Middle Initial) C. BORELLI, JOHN			Date of Receipt MM / DD / YYYY 04 / 09 / 2006		
Mailing Address 329 S. MAYFAIR AVE. #501			Amount of Each Receipt this Period 250.00		
City DALY CITY	State CA	Zip Code 94015			
FEC ID number of contributing federal political committee. C					
Name of Employer		Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

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**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 3 OF 03	
	<input type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
**TERRI PAC**

Full Name (Last, First, Middle Initial) <b>A. JIM STORK FOR CONGRESS</b>		Date of Receipt MM/DD/YYYY <b>06/23/2006</b>
Mailing Address <b>BOX 39474</b>		Amount of Each Receipt this Period <b>2,500.00</b>
City <b>FT. LAUDERDALE</b>	State Zip Code <b>FL 33339</b>	
FEC ID number of contributing federal political committee. <b>C00395517</b>		
Name of Employer <b>N/A</b>	Occupation <b>N/A</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>2,500.00</b>	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Receipt MM/DD/YYYY
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt MM/DD/YYYY
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional).....▶	<b>2,500.00</b>
TOTAL This Period (last page this line number only).....▶	<b>4,300.00</b>

26039130330



**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 01 OF 14

<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)

TERRI PAC

Full Name (Last, First, Middle Initial)

A. JUNCO PARTNERS		Date of Disbursement
Mailing Address 2399 SW 26 LN		04 / 19 / 2006
City MIAMI	State FL	Zip Code 33133
Purpose of Disbursement VIDEO PRODUCTION	Candidate Name	Amount of Each Disbursement this Period 1,000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

B. JUNCO PARTNERS		Date of Disbursement
Mailing Address 2399 SW 26 LN		06 / 27 / 2006
City MIAMI	State FL	Zip Code 33133
Purpose of Disbursement VIDEO PRODUCTION	Candidate Name	Amount of Each Disbursement this Period 500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

C. JUNCO PARTNERS		Date of Disbursement
Mailing Address 2399 SW 26 LN		04 / 25 / 2006
City MIAMI	State FL	Zip Code 33133
Purpose of Disbursement VIDEO PRODUCTION	Candidate Name	Amount of Each Disbursement this Period 500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

2,000.00

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

26039130331

**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 02 OF 04

21b  22  23  24  25  26  
 27  28a  28b  28c  29  30b

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NAME OF COMMITTEE (In Full)

TERRI PAC

Full Name (Last, First, Middle Initial)

**A.**

Full Name (Last, First, Middle Initial): PEAK STRATEGY GROUP

Mailing Address: BOX 550640

City: FT. LAUDERDALE State: FL Zip Code: 33355

Purpose of Disbursement: PRINTING

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: 04 20 2006

Amount of Each Disbursement this Period: 391.94

**B.**

Full Name (Last, First, Middle Initial): SARAH MILES

Mailing Address: 718 GEORGETTE ST.

City: EVANSVILLE State: IN Zip Code: 47720

Purpose of Disbursement: FINANCE

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: 05 01 2006

Amount of Each Disbursement this Period: 1,750.00

**C.**

Full Name (Last, First, Middle Initial): SARAH MILES

Mailing Address: 718 GEORGETTE ST.

City: EVANSVILLE State: IN Zip Code: 47720

Purpose of Disbursement: FINANCE

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: 05 15 2006

Amount of Each Disbursement this Period: 1,750.00

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

3891.94

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

26039130332

**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 03 OF 04

21b  22  23  24  25  26  
 27  28a  28b  28c  29  30b

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NAME OF COMMITTEE (In Full)

**TERRI PAC**

Full Name (Last, First, Middle Initial)

A. **NOVEMBER GROUP**

Mailing Address

**Box 340281**

City

**CORAL GABLES**

State

**FL**

Zip Code

**33234**

Purpose of Disbursement

**REIMBURSE TRAVEL - LAS VEGAS**

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
**06 02 2006**

Amount of Each Disbursement this Period

**1,401.70**

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

**NOVEMBER GROUP**

Mailing Address

**Box 340281**

City

**CORAL GABLES**

State

**FL**

Zip Code

**33234**

Purpose of Disbursement

**TRAVEL REIMBURSE - LAS VEGAS**

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
**06 15 2006**

Amount of Each Disbursement this Period

**334.60**

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

**INDIGO DESIGN**

Mailing Address

**Box 158**

City

**NEW BURG H**

State

**IN**

Zip Code

**47630**

Purpose of Disbursement

**WEB UPDATES**

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
**06 15 2006**

Amount of Each Disbursement this Period

**162.50**

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

**1,898.80**

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

2605913033

**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 04 OF 04

21b  22  23  24  25  26  
 27  28a  28b  28c  29  30b

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NAME OF COMMITTEE (In Full)

TERRI PAC

Full Name (Last, First, Middle Initial)

A. <u>NOVEMBER GROUP</u>		Date of Disbursement
Mailing Address <u>Box 340281</u>		MM/DD/YYYY <u>06/24/2006</u>
City	State	Zip Code
<u>CORAL GABLES</u>	<u>FL</u>	<u>33234</u>
Purpose of Disbursement <u>TRAVEL - LAS VEGAS</u>		Amount of Each Disbursement this Period <u>455.60</u>
Candidate Name		
Office Sought:	Disbursement For:	Category/Type
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

B. <u>NOVEMBER GROUP</u>		Date of Disbursement
Mailing Address <u>Box 348281</u>		MM/DD/YYYY <u>06/26/2006</u>
City	State	Zip Code
<u>CORAL GABLES</u>	<u>FL</u>	<u>33234</u>
Purpose of Disbursement <u>TRAVEL - FT. LAUDERDALE</u>		Amount of Each Disbursement this Period <u>584.19</u>
Candidate Name		
Office Sought:	Disbursement For:	Category/Type
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

C. <u>PEGGY LAMM FOR CONGRESS</u>		Date of Disbursement
Mailing Address <u>7290 SAMUEL DR. #300</u>		MM/DD/YYYY <u>06/28/2006</u>
City	State	Zip Code
<u>DENVER</u>	<u>CO</u>	<u>80221</u>
Purpose of Disbursement <u>DONATION</u>		Amount of Each Disbursement this Period <u>1,000.00</u>
Candidate Name		
Office Sought:	Disbursement For:	Category/Type
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

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

2,039.79

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

9,830.53

26039130334

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.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked  
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): *FedEx* Shipping Date  
*7/15/06*  
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

*MW* *7/17/06*  
 PREPARER DATE PREPARED

26039150335