## **STATEMENT OF**

FORM 1	ORGANI (See instru			Office use only
1. NAME OF COMMITTEE (in t	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
WHIRLPOOL C	ORPORATION - MAYTAG DE	EPENDABILITY FUND		
ADDRESS (number and s	treet) 403 WEST 4TH S	TREET NORTH		
(Check if addre	220			
is changed)	NEWTON		LIA L	50208   -
COMMITTEE'S E-MAI	ADDRESS	CITY▲	STATE▲	ZIP CODE ▲
mayers@mayt				1
	2405 ADDD500 (UDL)			
COMMITTEES WEB	PAGE ADDRESS (URL)			
2026399421	UMBER			
2. DATE 0.4	/ D D / Y Y Y Y Y 10 10 10 10 10 10 10 10 10 10 10 10 10			
3. FEC IDENTIFICA	TION NUMBER	C C00103010		
4. IS THIS STATEM	ENT NEW (N) O	R X AMENDED (A)		
I certify that I have exami	ned this Statement and to the best of my	vknowledge and belief it is true, correct	and complete	
Type or Print Name of	Treasurer Mark Ayers			
Signature of Treasurer	Electronically Filed by Mark A	Ayers	Date 0 4	10 7 2006
NOTE: Submission of fal	se, erroneous, or incomplete information	n may subject the person signing this S	•	s of 2 U.S.C. S437g.
Office Use Only		For further informatio Federal Election Comm Toll Free 800-424-953	nission	FEC FORM 1 (Revised 02/2003)

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5.	TYPE OF COMMITTEE (Check One)	
	(a) This committee is a principal campaign committee. (Complete the candidate information below.)	
	(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the calinformation below.)	ndidate
	Name of Candidate	
	Candidate Office Party Affiliation Sought: House Senate President	State District
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate	
		mocratic, ublican,etc.) Party. d or party
3. 	Name of Any Connected Organization or Affiliated Committee  Whirlpool Corporation	
L		
	Mailing Address  L  2000 North M-63	
	CITY▲ STATE ▲ Z	IP CODE A
	Relationship Connected	
	Type of Connected Organization:	
	X Corporation Corporation w/o Capital Stock Labor Organization	n
	Membership Organization Trade Association Cooperative	

Write or Type Committee Name

	WHIRLPOOL CORPORA	TION - MAYTAG DEPENDABILITY FUN	ID											
7.		Custodian of Records: Identify by name, address, (phone number optional), and position of the person in possession of Committee books and records.												
	Full Name													
	Mailing Address													
	Title or Position ♥	CITY A	STATE▲	ZIP CODE A										
			Telephone number											
3.	Treasurer: List the name a name and address of any of	and address (phone number optional) c designated agent (e.g., assistant treasure	of the treasurer of the committer).	tee; and the										
	Full Name of Treasurer													
	Mailing Address													
	Title or Position ♥	CITY A	STATE▲	ZIP CODE ▲										
			Telephone number											
	Full Name of Designated Agent													
	Mailing Address													
	Title or Position ♥	CITY A	STATE ▲	ZIP CODE A										
			Telephone number											

	FEC Form	<b>1</b> (Re	evised	102	/200	03)																											Pa	ge	4	 
9.	Banks or Other safety deposit box	xes or	main	tain		List Inds	baı	nks	or	oth	er c	dep	osi	torie	es i	in v	vhic	ch t	the	CO	mm	itte	e d	epo	sits	fu	nds	, ho	olds	ac	cou	ınts	, rei	nts		
	Name of Bank, Do	eposit	ory, e	etc.																																
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	Mailing Address					Ш																														 Ш
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Membership Organization

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Banks or Other Dep safety deposit boxes	or maintains funds.	posits funds, holds accounts, rents
Name of Bank, Depor	sitory, etc.	[ ADDITIONAL ]
Mailing Address		
	CITY △ S	TATE  ZIP CODE
Name of Any Conn	ected Organization or Affiliated Committee	[ ADDITIONAL ]
WHIRLPOOL CO	RPORATION POLITICAL ACTION COMMITTEE	
Mailing Address	1200 G Street NW	
	Suite 800	
	Washington	DC 20005
	CITY <b>▲</b>	STATE A ZIP CODE A
Relationship	Affiliated	
Type of Connected (	Organization:	
X Corporation		Labor Organization
	2 S por anon mo o aprica ocosic	

Trade Association

Cooperative

Designated Agent		1	ADDITIONAL ]
Full Name			
Title or Position <b>▼</b>	CITY A		
		elephone number	