FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1		(See instructio	ns)		Offic	e use only
NAME OF COMMITTEE (in f	full)	(Check if name is changed)	Example: If typy over the lines	ring, type	PE4M5	
Whalen for Co	ngress					
<u> </u>	11111	<u> </u>	<u> </u>		<u> </u>	
ADDRESS (number and s	street) C/O I	Kirk Whalen, He	art of America			
X (Check if address is changed)	ess	River Drive				
is changed)	Molin	1e 				61265 -
COMMITTEE'S E-MAI	I ADDRESS		CITY▲	STA	ATE_	ZIP CODE 📥
Gatorbeach@g						1
COMMITTEE'S WEB I	PAGE ADDRESS (U	RL)				
www.mikewha	•	, , , , , , , , , , , , , , , , , , , ,				1
			111111			
COMMITTEE'S FAX N 7608759828 2. DATE 0 2						
3. FEC IDENTIFICA	TION NUMBER	[C C00409573			
4. IS THIS STATEM	ENT NEW	(N) OR	X AME	NDED (A)		
I certify that I have examin	ned this Statement and	to the best of my kno	wledge and belief it is	true, correct and con	nplete	
Type or Print Name of	Treasurer k	Kirk Evan Whale	n			
Signature of Treasurer	Electronically Filed	d by Kirk Evan	Whalen	Date	0 2	15
NOTE: Submission of fal			y subject the person si TION SHOULD BE I	-	·	f 2 U.S.C. S437g.
Office Use Only			Federal Ele	r information contacted on Commission 00-424-9530 694-1100	ct:	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 cainformation below.)	andidate
	Name of MICHAEL LOUIS WHALEN Candidate	
	Candidate Party Affiliation REP Office Sought: X House Senate President	State IA District 1
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate	
		emocratic, publican,etc.) Party.
	(e) This committee is a separate segregated fund	
	(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fur committee.	nd or party
6.	Name of Any Connected Organization or Affiliated Committee	
L	WHALEN-IOWA VICTORY '06 COMMITTEE	
1		
	Mailing Address 228 S WASHINGTON ST STE 115	
		314
	CITY▲ STATE▲ Z	ZIP CODE A
	Relationship Joint Fundraise Rep	
	Type of Connected Organization:	
	X Corporation Corporation w/o Capital Stock Labor Organization	on
	Membership Organization Trade Association Cooperative	

Write or Type Committee Name)		Page 3
The or Type Committee Name			
Whalen for Congress			
Custodian of Records: Identify possession of Committee books	by name, address, (phone numbe s and records.	er optional), and posit	ion of the person in
Full Name Kirk Evan W	halen		
Mailing Address	1727 Westminster Circle	e	
	Davenport	IA	<u>52807</u> _
Title or Position ▼	CITY A	STATI	ZIP CODE A
Treasurer		Telephone number	563 343 1
name and address of any designment of Treasurer Kirk Evan W		úrer).	committee, and the
Mailing Address	1727 Westminster Circle	e	
_	Davenport	IA	52807
Title or Position ▼	Davenport CITY A	IA Stati	
Title or Position ♥ Treasurer			
•		STATI	ZIP CODE A
Treasurer Full Name of Designated		STATI	ZIP CODE A
Treasurer Full Name of Designated Agent		STATI	ZIP CODE A 563 _ 343 _ 1

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9.	Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.						
	Name of Bank, Depository, etc						
	Walco	tt Trust & Savings Bank					
	Mailing Address	101 West Bryant Street					
		Walcott IA 5277	73 _ [
		CITY A STATE ZIP	CODE △				

Type of Connected Organization:

Membership Organization

Corporation

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Banks or Other Dep safety deposit boxes Name of Bank, Depo	or maintains funds.	lds accounts, rents
Mailing Address	BB&T 1909 K Street NW	
Mailing Address		
	Washington	20006
	CITY A STATE A	ZIP CODE 🛆
Name of Any Con	nected Organization or Affiliated Committee	
	lected Organization of Anniated Committee	[ADDITIONAL]
ROMP IV 2006		
Mailing Address	228 S WASHINGTON ST STE 115	
Mailing Address		
	ALEXANDRIA VA	22314
	CITY A STATE A	ZIP CODE
Relationship	Joint Fundraiser Rep	

Corporation w/o Capital Stock

Trade Association

Labor Organization

Cooperative

Designated Agent			[ADDITIONAL]
Full Name			
Title or Position ♥	CITY A	STATE A	ZIP CODE A

Type of Connected Organization:

Membership Organization

Corporation

Χ

FEC Form 1	Revised 1/2001)	Page 7 / 8
Banks or Other De safety deposit boxes Name of Bank, Depo	or maintains funds.	ds accounts, rents
	Wachovia Bank	
Mailing Address	1753 Pinnacle Drive	
	McLean VA	22102
	CITY A STATE A	ZIP CODE 🛕
Name of Any Conn	nected Organization or Affiliated Committee	
		[ADDITIONAL]
IA-01 CONGRES	SIONAL VICTORY COMMITTEE	
Mailing Address	PO BOX 40177	
	WASHINGTON	20016
	CITY▲ STATE ▲	ZIP CODE 🛦
Relationship	Joint Fundraiser Rep	

Corporation w/o Capital Stock

Trade Association

Labor Organization

Cooperative

Designated Agent		[ADDITIONAL]	
Full Name			
-			_
Title or Position ▼	CITY A Te	STATE A ZIP CODE A elephone number = =	