

FOR INSTRUCTIONS, SEE BACK OF FORM

# DISCLOSURE SUMMARY PAGE

Reset Form

<b>FORM DR-2</b> (Rev. 12/2005)	<b>DISCLOSURE REPORT</b>
<b>For Office Use Only</b>	
Comm. # _____	
Logged In _____	
Scanned _____	
Computer _____	
Audited _____	
File with: Iowa Ethics and Campaign Disclosure Board 510 E. 12 <sup>th</sup> St. 1A Des Moines, Iowa 50319 Fax: 515-281-3701	

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
**MEDIACOM COMMUNICATION CORPORATION**

**IMPORTANT:** Indicate by # type of committee you are reporting for: 11  
 ( 1 ) Statewide/Legislative/Judge Standing for Retention Candidate ( 2 ) State PAC ( 3 ) State Party  
 ( 4 ) County Central Committee ( 5 ) County Candidate ( 6 ) City Candidate ( 7 ) School Board or Other Political Subdivision Candidate ( 8 ) County PAC ( 9 ) City PAC ( 10 ) School Board or Other Political Subdivision PAC ( 11 ) Local Ballot Issue

**CANDIDATE COMMITTEES ONLY:**

Candidate Name \_\_\_\_\_ Political Party (if applicable) \_\_\_\_\_  
 Office Sought \_\_\_\_\_ District (if Senate or House) \_\_\_\_\_

**RECEIVED**  
 JUN - 8 2006 FAX

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code section 88B.32A(7) the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

Michelle M. McBride      515-243-0445      6-9-06  
 SIGNATURE OF PERSON FILING REPORT      TELEPHONE      DATE SIGNED

I AM FILING A MAY 5 2006 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.  
 (report date)      Indicate by # 1

CHECK IF AMENDMENT TO REPORT DATED 6-8-06

Local Committees, enter Date of Election  
NOVEMBER 8, 2005

County & Local Committees, enter County in which Election is held  
**SEE ATTACHED**

Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
 (You must continue to file reports until a DR-3 is filed.)

## STATEMENT OF CASH ON HAND

<b>CASH ON HAND</b> at the beginning of the reporting period. (Total of all funds held by the committee. This amount <b>MUST</b> be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)	\$ 0.00
<b>ADD TOTAL MONEY TAKEN IN THIS PERIOD</b>	
Schedule A: Cash Contributions total (Attach Schedule A) (**also see in-kind below)	1,156,500.00
Schedule F: Loans Received total (Attach Schedule F)	0.00
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	0.00
<u>(Schedule H applies to Candidates' Committees Only)</u>	
<b>SUB-TOTAL</b>	\$ 1,156,500.00
<b>SUBTRACT TOTAL MONEY SPENT THIS PERIOD</b>	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	1,156,500.00
Schedule F: Loan Repayments total (Attach Schedule F)	0.00
<b>CASH ON HAND</b> at the end of this reporting period (if final report balance must be zero) (Attach DR-3)	\$ 0.00

**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$ 0.00
**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$ 657,750.00
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$ 0.00
CONSULTANT BREAKDOWN (Schedule G Attached?)	YES <input checked="" type="checkbox"/> NO

**CANDIDATE COMMITTEES ONLY:**  
 VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) \$ 0.00

**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

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<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input checked="" type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**CONTRIBUTIONS – MONEY TAKEN IN**

(Including candidate's personal funds)

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
**MEDIACOM COMMUNICATION CORPORATION**

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**CAUTION:** Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
	ID# General Funds CK# TRANSFER	MEDIACOM COMMUNICATION CORP 100 CRYSTAL RUN ROAD NEW YORK NY 10941	NONE	\$1,156,500	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 1,156,500.	
<b>TOTAL (if last page of this schedule)</b>				\$ 1,156,500	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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**EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT**

<b>SCHEDULE</b> <b>B</b> (REV. 07/03)	<b>MONETARY</b> <b>EXPENDITURES</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO A STATE OR LEGISLATIVE CANDIDATE, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME (Must be same as on Statement of Organization)  
**MEDACOM COMMUNICATION CORPORATION**

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
8/26/2005	ID# CK# TRANSFER	PROJECT TAXPAYER PROTECTION DES MOINES IA 50309	CAMPAIGN EXPENSES	\$ 1,000
8/26/2005	ID# CK# TRANSFER	PROJECT TAXPAYER PROTECTION DES MOINES IA 50309	CAMPAIGN EXPENSES	70,500
10/20/2005	ID# CK# TRANSFER	PROJECT TAXPAYER PROTECTION DES MOINES IA 50309	CAMPAIGN EXPENSES	2,500
9/15/2005	ID# CK# TRANSFER	PROJECT TAXPAYER PROTECTION CAMPAIGN DES MOINES IA 50309	CAMPAIGN EXPENSES	62,500
9/29/2005	ID# CK# TRANSFER	PROJECT TAXPAYER PROTECTION CAMPAIGN DES MOINES IA 50309	CAMPAIGN EXPENSES	45,000
10/12/2005	ID# CK# TRANSFER	PROJECT TAXPAYER PROTECTION CAMPAIGN DES MOINES IA 50309	CAMPAIGN EXPENSES	115,000
10/14/2005	ID# CK# TRANSFER	PROJECT TAXPAYER PROTECTION CAMPAIGN DES MOINES IA 50309	CAMPAIGN EXPENSES	250,000
10/18/2005	ID# CK# TRANSFER	PROJECT TAXPAYER PROTECTION CAMPAIGN DES MOINES IA 50309	CAMPAIGN EXPENSES	170,000
<b>GRAND TOTAL</b>				<b>\$ 716,500.</b>
<b>TOTAL (If last page of this schedule)</b>				<b>\$ 716,500.</b>

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**  
 Purchases of certain campaign property costing \$200 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)  
 Expenditures to personalities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detailed on Schedule G by the amount, purpose, and date of each type of expenditure made by the person(s) on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(b).)

FOR INSTRUCTIONS, SEE BACK OF FORM



**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input checked="" type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**STATE PAC COMMITTEES: NOTE:** FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
 MEDIACOM COMMUNICATION CORPORATION

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/26/2005	ID# CK# TRANSFER	PROJECT TAXPAYER PROTECTION CAMPAIGN DES MOINES IA 50309	CAMPAIGN EXPENSES	\$ 50,000
10/27/2005	ID# CK# TRANSFER	PROJECT TAXPAYER PROTECTION CAMPAIGN DES MOINES IA 50309	CAMPAIGN EXPENSES	175,000
11/01/2005	ID# CK# TRANSFER	PROJECT TAXPAYER PROTECTION CAMPAIGN DES MOINES IA 50309	CAMPAIGN EXPENSES	125,000
11/15/2005	ID# CK# TRANSFER	PROJECT TAXPAYER PROTECTION CAMPAIGN DES MOINES IA 50309	CAMPAIGN EXPENSES	75,000
12/21/2005	ID# CK# TRANSFER	PROJECT TAXPAYER PROTECTION CAMPAIGN DES MOINES IA 50309	CAMPAIGN EXPENSES	15,000
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 440,000
<b>TOTAL (if last page of this schedule)</b>				\$ 1,156,500

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H Instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G Instructions and Iowa Code 68A.402(3)(j).)

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)  
**MEDLACOM COMMUNICATION CORPORATION**



<b>SCHEDULE E</b> (Rev. 05/07)	<b>IN-KIND CONTRIBUTIONS</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DATE RECEIVED (MM/DD/YY)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
11/08/2005	Mediacom Communications Corporation 100 Crystal Run Road Middleton, NY 10941		8544 video ads \$25 on 35 networks	\$ 213,600.00	<input type="checkbox"/>
11/08/2005	Mediacom Communications Corporation 100 Crystal Run Road Middleton, NY 10941		Law Media Group Sept-Oct-Nov	35,000.00	<input type="checkbox"/>
10/28/2005	Mediacom Communications Corporation 100 Crystal Run Road Middleton, NY 10941		16,366 30 SEC ADS ON 25 NETWORKS	409,150.00	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
<b>SUB-TOTAL</b>				<b>\$</b>	
<b>TOTAL (if last page of this schedule)</b>				<b>\$</b>	<b>657,750.00</b>

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.