

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Resort Form	FORM DR-2 (Rev. 07/2003)	DISC. REPORT
For Office Use Only		
Comm #	_____	
Logged In	_____	
Scanned	_____	
Computer	_____	
Audited	_____	

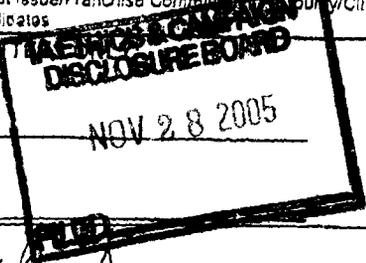
COMMITTEE NAME (Must be same as on Statement of Organization)
Concerned Citizens for Better Education Committee

IMPORTANT: Indicate type of committee you are reporting for: 6

(1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate
 (5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee
 (8) Support State of Candidates

CANDIDATE COMMITTEE

Candidate Name _____ Political Party _____
 Office Sought _____ District (if Senate or House) _____



Steve Walsby SIGNATURE OF TREASURER (or person filing this report) 319.935.3791 TELEPHONE 11-23-05 DATE SIGNED

Late filed reports are subject to possible civil and criminal penalties.

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A January 19, 2005 REPORT FOR AN/A (1) ELECTION (2) NON-ELECTION YEAR.
 (report date)

Indicate one 2

CHECK IF AMENDMENT TO REPORT DATED _____

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

Local Committees, enter Date of Election	_____
County & Local Committees, enter County in which Election is held	_____

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount MUST 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.)	\$	<u>\$ 942.77</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (**also see in-kind below)		<u>-0-</u>
Schedule F: Loans Received total (Attach Schedule F)		_____
Schedule H: Total Sales of Campaign Property (Attach Schedule H)		_____
<u>(Schedule H applies to Candidates' Committees Only)</u>		
SUB-TOTAL	\$	_____
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		<u>-0-</u>
Schedule F: Loan Repayments total (Attach Schedule F)		_____
CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)	\$	<u>\$ 942.77</u>

**UNPAID BILLS (From Schedule D - Attach Schedule D) \$ _____

**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) \$ _____

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F) \$ _____

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?) YES NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) \$ _____

For Instructions, See Back of Form

Reset Form

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input 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)
Concerned Citizens for Better Education

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
11/09/05	ID# CK#	R.T. Miller 3193 King Ave Rowley, IA 52329		\$ 200	<input type="checkbox"/>
11/09/05	ID# CK#	B.A. Goldenstein 1686 Nolan Ave Independence, IA 50644		200	<input type="checkbox"/>
11/09/05	ID# CK#	Steve Davis 2048 Jamestown Ave Independence, IA 50644		500	<input type="checkbox"/>
11/09/05	ID# CK#	Ed Michpels 2087 330th St Walker, IA 52352		100	<input type="checkbox"/>
11/09/05	ID# CK#	Ray Rosencrans RR Rowley, IA 52329		300	<input type="checkbox"/>
11/09/05	ID# CK#	Dave Jordening 3457 Honley Av Independence, IA 50644		300	<input type="checkbox"/>
11/09/05	ID# CK#	Karen Beard 600 2nd Ave S.W. Independence, IA 50644		200	<input type="checkbox"/>
11/09/05	ID# CK#	Frank Rehberg RR Rowley, IA 52329		200	<input type="checkbox"/>
11/15/05	ID# CK#	Wendell Circus 1635 270th St Independence, IA 50644		250	<input type="checkbox"/>
11/15/05	ID# CK#	Gaylen Burco 1537 Kentucky Av Independence, IA 50644		500	<input type="checkbox"/>
SUB-TOTAL				\$ 2750	
TOTAL (if last page of this schedule)				\$	

* 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.

For Instructions, See Back of Form



SCHEDULE
A
(Rev. 07/03) MONETARY RECEIPTS

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

CHECK THIS BOX IF AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)
Concerned Citizens for Better Education

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DATE RECEIVED (MM/DD/YY)	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
11/15/05	ID# CK#	Nina Kaesser Trust Rowley, IA 52329		\$ 200	<input type="checkbox"/>
11/15/05	ID# CK#	Margaret Zueser Rowley, IA 52329		100	<input type="checkbox"/>
11/15/05	ID# CK#	Charles Catt Trust 2158 Nethan Bethel Ave Independence, IA 50644		500	<input type="checkbox"/>
11/15/05	ID# CK#	Dave Lynch 2275 Iowa Ave Independence, IA 50644		150	<input type="checkbox"/>
11/15/05	ID# CK#	Raymon Rasmussen R.R. Rowley, IA 52329		100	<input type="checkbox"/>
11/17/05	ID# CK#	Tom Greenley 1780 185 th St. Independence, IA 50644		100	<input type="checkbox"/>
11/17/05	ID# CK#	Della Walhart 1774 N. Bethel Ave Independence, IA 50644		100	<input type="checkbox"/>
11/17/05	ID# CK#	Carl Van Tasell 513 14 th Ave Independence, IA 50644		100	<input type="checkbox"/>
11/17/05	ID# CK#	Roger Noe R.R. Rowley, IA 52329		75	<input type="checkbox"/>
11/17/05	ID# CK#	Charles Johnson 1849 185 th St Independence, IA 50644		300	<input type="checkbox"/>

SUB-TOTAL

\$ 1725

TOTAL (if last page of this schedule)

\$

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For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN
(including candidate's personal funds)

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

COMMITTEE NAME (Must be same as on Statement of Organization)
Concerned Citizens for Better Ed.

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.

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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
11/22/05	ID# CK#	"Butch" Leonard Hunter Jr. 315 6th Ave S.W. Independence, IA 50644		\$ 50	<input type="checkbox"/>
11/22/05	ID# CK#	Larry King R.R. Brandon, IA 52210		100	<input type="checkbox"/>
11/25/05	ID# CK#	Richard Kuet 1673 245 St. Independence, IA 50644		200	<input type="checkbox"/>
11/25/05	ID# CK#	Jeff Temmer 1528 220th St Independence, IA 50644		250	<input type="checkbox"/>
11/25/05	ID# CK#	Nyal Dage 2869 Gabriel Ave Brandon, IA 52210		150	<input type="checkbox"/>
11/25/05	ID# CK#	Steve Walkhart 2121 Plymouth Independence, IA 50644		300	<input type="checkbox"/>
11/25/05	ID# CK#	Unitemized		30	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$1080

TOTAL (if last page of this schedule)

\$9155

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Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input 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)
Concerned Citizens for Better Education

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
11-08-05	ID# CK#	Paul Don PO Box 188 Ocheyedan Ia 51354	consulting	\$2000 ⁰⁰
11-12-05	ID# CK#	Congdon Printing 115 1/2 2nd St Cedar Falls Ia 50613	post cards	250 ⁰⁰
11-12-05	ID# CK#	Paul Don see above	web site	25 ⁰⁰
11-19-05	ID# CK#	Culver Secretary of State Des Moines, Ia	information (names)	16.20
11-19	ID# CK#	Congdon Printing 115 1/2 2nd Cedar Falls 50613	print fliers	1800.00
11-21-05	ID# CK#	Independence News Papers Inc. 116 5ave NE Indep 50644	Print ads	722.70
11-22-05	ID# CK#	Paul Don PO 188 Ocheyedan Ia 51354	consulting	2000 ⁰⁰
11-22-05	ID# CK#	Citizens State Bank PO Box 515 Wintrop Ia 50682	record search	15 ⁰⁰
SUB-TOTAL				\$ 7053.90
TOTAL (if last page of this schedule)				\$

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 88A.6(3)(i).)

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input 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)
Concerned Citizens for Better Education

DATE EXPENDED (MM/DDYYR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
11-22	ID# CK#	WMT Radio 600 old main St NE Cedar Rapids Ia	air time	\$ 119 ⁰⁰
11-23	ID# CK#	KQMG Radio 150 S Indip Ia 50644	air time	197 ⁰¹
11-23	ID# CK#	KOET Radio 150 S Oelwein Iowa	air time	258 ⁰⁰
11-26	ID# CK#	Karen's Right- Right 25-15 Fall Ave Waterloo, Ia 50701	post cards	\$ 1536 ²⁰
	ID# CK#			
SUB-TOTAL				\$ 2110.21
TOTAL (if last page of this schedule)				\$ 9164.11

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.6(3)(i).)