

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 12/2005)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	9021
Logged in	SW
Scanned	
Computer	
Audited	
File with: Iowa Ethics and Campaign Disclosure Board 510 E. 12 th , Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-3701	

COMMITTEE NAME (Must be same as on Statement of Organization)

**BUENA VISTA COUNTY
REPUBLICAN CENTRAL COMMITTEE**

IMPORTANT: Indicate by # type of committee you are reporting for: 7

(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) _____

MAY 10 2005

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code section 68B.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.

SIGNATURE OF PERSON FILING REPORT

712-732-2663
TELEPHONE

5/5/06
DATE SIGNED

I AM FILING A 5/19/06 REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR.
(report date) Indicate by # 1

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 DR-3 is filed)

Local Committees, enter Date of Election _____

County & Local Committees, enter County in which Election is held
BUENA VISTA

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds 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.)\$ 6339.28

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (**also see in-kind below)..... 3242.00

Schedule F: Loans Received total (Attach Schedule F)..... _____

Schedule H: Total Sales of Campaign Property (Attach Schedule H)..... _____

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....\$ 9,581.28

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)..... 814.20

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).....\$ 8767.08

**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).....\$ _____

CONSULTANT BREAKDOWN (Schedule G Attached?) _____ YES _____ NO

CANDIDATE COMMITTEES ONLY:

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

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

For Instructions, See Back of 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)
**BUENA VISTA COUNTY
 REPUBLICAN CENTRAL COMMITTEE**

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
6/6/06	ID# CK#	DOUGLAS J. LARSON DOS 216 CASINO ROAD STORM LAKE, IA 50588	N/A	\$ 100	<input type="checkbox"/>
6/6/06	ID# CK#	GARY LALONE 163 S. COVE STORM LAKE, IA 50588	"	100	<input type="checkbox"/>
6/6/06	ID# CK#	ROLLIE KRUSE 5311 180TH AVE ALBERT CITY, IA 50510	"	125-	<input type="checkbox"/>
6/6/06	ID# CK#	ROBERT O'BRIEN 912 N. MAE STORM LAKE, IA 50588	"	100-	<input type="checkbox"/>
6/6/06	ID# CK#	CHET BRECHER 912 HWY 110 BOX 462 STORM LAKE, IA 50588	"	100-	<input type="checkbox"/>
6/6/06	ID# CK#	ROBERT BERGENDOFF 118 SCOTT STREET STORM LAKE, IA 50588	"	100-	<input type="checkbox"/>
6/6/06	ID# CK#	DALE R. ARENDS 2130 580TH ST NEWELL IA 50568-7546	"	100-	<input type="checkbox"/>
6/6/06	ID# CK#	RUSSELL EDDIE 1101 PIERCE DR. STORM LAKE, IA 50588	"	100-	<input type="checkbox"/>
6/6/06	ID# CK#	JAMES TREAT 319 W 9TH ST STORM LAKE, IA 50588	"	100-	<input type="checkbox"/>
6/6/06	ID# CK#	RANDAL SIEVERS 5626 175TH AVE STORM LAKE, IA 50588	"	100	<input type="checkbox"/>
SUB-TOTAL				\$ 1025	
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.

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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 State Official Organization)
**BUENA VISTA COUNTY
 REPUBLICAN CENTRAL COMMITTEE**

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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
6/6/06	ID# CK#	JAMES M. PRICHARD 1301 W 6TH ST STORM LAKE, IA 50588	N/A	\$ 100	<input type="checkbox"/>
6/6/06	ID# CK#	STANLEY SIEVERS 922 LEONA CIRCLE STORM LAKE, IA 50588	N/A	50	<input type="checkbox"/>
5/5/06	ID# CK#	STANLEY COVEY 905 EMERALD DR. STORM LAKE, IA 50588		100	<input type="checkbox"/>
5/5/06	ID# CK#	GLEN HUNTINGTON P.O. BOX 976 STORM LAKE, IA 50588		100-	<input type="checkbox"/>
5/5/06	ID# CK#	KAREN M. STRAWN 303 E. LAKESHORE DR. STORM LAKE, IA 50588		100-	<input type="checkbox"/>
5/5/06	ID# CK#	DENNIS VAHDT 3001 LEONA DRIVE STORM LAKE, IA 50588		100-	<input type="checkbox"/>
5/5/06	ID# CK#	KEITH W. PIERCE 901 EMERALD DR. STORM LAKE, IA 50588		100-	<input type="checkbox"/>
5/5/06	ID# CK#	BILL PATTON 837 1/2 610TH ST STORM LAKE, IA 50588		100-	<input type="checkbox"/>
5/5/06	ID# CK#	JAMES HAAHR 1606 SHOREWAY ROAD STORM LAKE, IA 50588		100-	<input type="checkbox"/>
5/5/06	ID# CK#	E. L. BALLOU 801 WINTHROP CIRCLE STORM LAKE, IA 50588		100	<input type="checkbox"/>
SUB-TOTAL				\$ 950	
TOTAL (if last page of this schedule)				\$	

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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)

BUENA VISTA COUNTY

REPUBLICAN CENTRAL COMMITTEE

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
1/5/06	ID# CK#	D.A. YOUNG 202 W. 3RD ST. STORM LAKE, IA 50588	N/A	\$ 100	<input type="checkbox"/>
1/5/06	ID# CK#	DENNIS WEBER 510 ALTA VISTA ALTA, IA. 51002	N/A	100	<input type="checkbox"/>
2/24/06	ID# CK#	VARIOUS CONTR.	N/A	44-	<input type="checkbox"/>
3/16/06	ID# CK#	VARIOUS CONTR	N/A	150-	<input type="checkbox"/>
3/30/06	ID# CK#	MELVIN SAMUELSON 813 ANGLER DR. STORM LAKE, IA 50588	N/A	100-	<input type="checkbox"/>
3/30/06	ID# CK#	MARLOWE FELDMAN P.O. BOX 6 ALBERT CITY IA 50510	N/A	100	<input type="checkbox"/>
3/30/06	ID# CK#	VARIOUS CONTRIBUTIONS 13-#46-CONVENTION FEES	N/A	598-	<input type="checkbox"/>
3/30/06	ID# CK#	VARIOUS CONTR.	N/A	75-	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

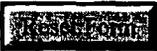
\$ 1267

TOTAL (if last page of this schedule)

\$ 3242

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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)
**BUENA VISTA COUNTY
REPUBLICAN CENTRAL COMMITTEE**

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
1/26/02	ID# CK#	B.V. Co. AUDITOR 215 E. 5TH STORM LAKE, IA 50588	DONOR LIST	\$ 5-
2/24/06	ID# CK#	BV CO. JOURNAL BOX 606 NEWELL, IA 50508-0606	CLUBS ADS	60 ²⁰ -
2/24/06	ID# CK#	THE PLOT & TRIBUNE 111 W 7TH ST. STORM LAKE, IA 50588	" "	126-
4/17/06	ID# CK#	REPUBLICAN PARTY OF IOWA 621 E. 9TH ST DES MOINES IA 50309	DISTRICT DELEGATE FEES	520-
3/28/06	ID# CK#	JIM PLAGGE 402 ZUIDE ZEE CT ORANGE CITY, IA 50141	CONVENTION MEALS	78-
4/15/04	ID# CK#	PRAIRIE LAKES AREA BOX 1399 FORT DOCKE, IA 50501	ROOM RENT	25-
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 814.20
TOTAL (if last page of this schedule)				\$ 814.20

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)(i).)