

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

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: 4
 (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 Union

CANDIDATE COMMITTEES ONLY:
 Candidate Name: _____ Political Party (if applicable): _____
 Office Sought: _____ District (if Senate or House): _____

FORM
DR-2
 (Rev. 12/2005) DISCLOSURE REPORT

For Office Use Only
 Comm. # 9021
 Logged In S
 Scanned _____
 Computer _____
 Audited _____

File with:
 Iowa Ethics and Campaign
 Disclosure Board
 510 E. 12th Ste. 1A
 Des Moines, Iowa 50319
 Fax: 515-281-3701

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] (Signature) 712-732-2663 (Telephone) 10/19/06 (Date Signed)
 SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A 10/19/06 REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR.
 (report date) Indicate by #

- 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
11/06
 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.)	\$	<u>8519.73</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)		<u>1150.00</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	\$	<u>9669.73</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		<u>4991.12</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>4678.61</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)	\$	_____
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
10/10/06	ID# CK#	THE COMMONWEALTH PAC, 45 SCHOOL ST. 2nd FLOOR BOSTON, MA 02108	IOWA #	\$ 250-	<input type="checkbox"/>
8/24/06	ID# CK#	DORIS FRITCHER 164 SCOTT ST. STORM LAKE, IA 50588		100-	<input type="checkbox"/>
8/24/06	ID# CK#	FREEMAN FOR SENATE COMMITTEE 203 LAKE CREEK RD. ALTA, IA 51002	SELF	100-	<input type="checkbox"/>
8/24/06	ID# CK#	CLAYTON L. CHRISTENSEN 3010 LEONA DR. STORM LAKE, IA 50588		100-	<input type="checkbox"/>
8/24/06	ID# CK#	L. M. BURNSIDE 209 WALNUT LAKE STORM LAKE, IA 50588		100-	<input type="checkbox"/>
8/24/06	ID# CK#	NANCY A HALL 20 ST. ANDREWS DR. STORM LAKE, IA 50588		100-	<input type="checkbox"/>
8/24/06	ID# CK#	WILBERT VILAS 1612 SHOREWAY ROAD STORM LAKE, IA 50588		100-	<input type="checkbox"/>
10/4/06	ID# CK#	JOHN B. ANDERSON 111 EMERALD DR. STORM LAKE, IA 50588		100-	<input type="checkbox"/>
10/4/06	ID# CK#	JEFF STEWART 185 WOODH ST. ALTA, IA 51002		100-	<input type="checkbox"/>
10/4/06	ID# CK#	S. G. JOHNSON 1721 590TH ST STORM LAKE, IA 50588		100	<input type="checkbox"/>
SUB-TOTAL				\$ 1150	
TOTAL (if last page of this schedule)				\$ 1150	

* 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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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 PAC Application)
**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
7/20/06	ID# CK#	LORNA BARASIDE 709 WALNUT LANE STORM LAKE, IA 50588	4TH of JULY supplies	\$ 32.06
7/27/06	ID# CK#	RICHARD DIRKX 1566 HWY 7 STORM LAKE, IA 50588	PARADE CADDY	24.72
7/27/06	ID# CK# 361	KEN HACH CAMPAIGN 301 HWY 7 ALTA, IA 51002	CAMPAIGN CONTRIBUTION	500.00
7/27/06	ID# CK#	DALE AREND'S CAMPAIGN 2130 580TH ST REWELL, IA 50568	"	500.00
7/27/06	ID# CK#	RICHARD DIRKX CAMPAIGN 1566 HWY 7 STORM LAKE, IA 50588	"	500.00
7/27/06	ID# CK#	MARY IOWA FREEMAN CAMPAIGN LAKE CREEK VILLA ALTA IA 51002	"	250.00
7/27/06	ID# CK#	KAREN STRAWN 303 E. LAKESHORE ROAD STORM LAKE, IA 50588	ICE CREAM SOCIAL SUPPLIES	31.82
7/27/06	ID# CK#	REPUBLICAN PARTY OF IOWA 621 E. 9TH ST DES MOINES, IA 50309	CONTRIBUTION	2,500.00
SUB-TOTAL				\$ 4,378.60
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 68A.402(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM



SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

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**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
9/6/06	ID# CK#	BUENA VISTA Co. Auditor 215 E. 5th STORM LAKE, IA 50588	VOTER LIST	\$39.56
9/6/06	ID# CK#	WILLIAM STRAWN 303 E. LAKESHORE DR	POSTAGE	13.02
9/6/06	ID# CK#	PHIL HAVENS CAMPAIGN 716 LAKE AVE STORM LAKE IA 50588	CAMPAIGN CONTR	500-
9/6/06	ID# CK#	MARY LOU FREEMAN MEMORIAL LAKE CREEK VILLA ALTA, IA 51002		100-
	ID# CK#			

SUB-TOTAL	\$ 652.52
TOTAL (if last page of this schedule)	\$ 4991.12

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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).)