RECEIVED

MAY 16 2006

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

DISCLOSURE SUMMARY PAGE

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

For Office Use Only
Comm. # ____
Logged In ____
Scanned ____
Computer ____
Audited ____

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

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

Committee to Elect Kathy Bennett

IMPORTANT: Indicate by # type of committee you are reporting for: 5
(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: Kathy Bennett

Political Party (if applicable): Democrat

Office Sought: Recorder

District (if Senate or House):

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.

Sue Killing Treasurer — SIGNATURE OF PERSON FILING REPORT

712-469-3924 — TELEPHONE

5/16/06 — DATE SIGNED

I AM FILING A Supplementary 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: Calhoun

Kathy-
As far as I'm concerned this is ready to be faxed unless you see something. (515) 281-3701
I kept a copy 2150.

$	0.00
	450.00
	0.00
	0.00
$	450.00
	418.69
	0.00
CASH ON HAND at the end of this reporting period (If final report balance must be zero) (Attach DR-3) $	31.31
**UNPAID BILLS (From Schedule D - Attach Schedule D) $	0.00
**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) $	0.00
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F) $	0.00

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

Reset Form

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
☐ 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)*

Committee to Elect Kathy Bennett

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.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN $750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), 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
03/14/2006	ID# CK# 5127	David W. Thompson, PO Box 750728, Petaluma, CA 94975	Brother	$250.00	
03/27/2006	ID# CK# 7449	Marty Minnick, 413 Austin, Rockwell City, IA 50579		$100.00	
03/31/2006	ID# CK# 6074	Mary C. Warner, 749 Pleasant St., PO Box 189, Rockwell City, IA 50579		$100.00	
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
			SUB-TOTAL	$	
			TOTAL ***(if last page of this schedule)***	$ 450.00	

* 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.

Page 1 of 1 (for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

SCHEDULE B (Rev 07/03)	MONETARY EXPENDITURES

☐ CHECK THIS BOX IF AMENDING FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

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)*

Committee to Elect Kathy Bennett

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
04/12/2006	ID# CK# Bank debit	Union State Bank, 400 Main St, PO Box 268, Rockwell City, IA 50579	Printed checks	$ 11.95
04/20/2006	ID# CK# 1001	Calhoun Co Reminder, 515 4th St. PO Box 106, Rockwell City, IA 50579	Printed handout cards	131.14
04/20/2006	ID# CK# 1002	Steven's Sign Shop, 217 4th Street, Rockwell City, IA 50579	T-Shirts; sign	275.60
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
			SUB-TOTAL	$
			TOTAL ***(if last page of this schedule)***	$ 418.69

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)(l).)