

DISCLOSURE SUMMARY PAGE

Case

S

COMMITTEE NAME (Must be same as on Statement of Organization)
Volk for Supervisor Committee

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: **Don Volk** Political Party (if applicable): **Non partisan**
 Office Sought: **County Supervisor Dist 3** District (if Senate or House)

Stamp: FILED OCT 20 2006 PM 10:19.06 DIST 3

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

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.

Don Volk *712 243 1989* *10-18-06*
SIGNATURE OF PERSON FILING REPORT **TELEPHONE** **DATE SIGNED**

I AM FILING A *Oct 19, 2006* 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
Nov 7, 2006
 County & Local Committees, enter County in which Election is held
CASS

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><i>0</i></u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below).....		<u><i>1,203.50</i></u>
Schedule F: Loans Received total (Attach Schedule F).....		<u><i>0</i></u>
Schedule H: Total Sales of Campaign Property (Attach Schedule H)		<u><i>0</i></u>
(Schedule H applies to Candidates' Committees Only)		
SUB-TOTAL	\$	<u><i>1,203.50</i></u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below).....		<u><i>962.43</i></u>
Schedule F: Loan Repayments total (Attach Schedule F).....		<u><i>0</i></u>
CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3).....	\$	<u><i>241.07</i></u>
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	<u><i>0</i></u>
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	<u><i>0</i></u>
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F).....	\$	<u><i>0</i></u>
CONSULTANT BREAKDOWN (Schedule G Attached?)	YES	<input checked="" type="checkbox"/> NO
CANDIDATE COMMITTEES ONLY:		
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$	<u><i>0</i></u>

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

For instructions, see back of form

Receipt Form

SCHEDULE
A
(Rev. 07/03) MONETARY RECEIPTS

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

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

VOLUNTEER SUPERVISOR COMMITTEE

CHECK THIS BOX IF AMENDING FORM

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/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
	ID# CK#	UNITED-200 CONTRIBUTIONS		\$ 100.00	<input type="checkbox"/>
4/9/06	ID# CK#	104 E 5TH ATLANTA, GA 30309 RICHARD HOWARD		50.00	<input type="checkbox"/>
4/27/06	ID# CK#	903 E 22ND ST ATLANTA, GA 30316 ROBERT CAMPBELL		50.00	<input type="checkbox"/>
5/5/06	ID# CK#	1577 MARSH RD ATLANTA, GA 30316 DEN SENTAG		100.00	<input type="checkbox"/>
5/26/06	ID# CK#	903 E 22ND ST ATLANTA, GA 30316 ROBERT CAMPBELL		70.00	<input type="checkbox"/>
5/26/06	ID# CK#	300 W 22ND ST ATLANTA, GA 30316 KEITH HARLAN		100.00	<input type="checkbox"/>
5/31/06	ID# CK#	903 E 22ND ST ATLANTA, GA 30316 DELMAR PATTERSON		50.00	<input type="checkbox"/>
6-1-06	ID# CK#	903 E 22ND ST ATLANTA, GA 30316 GUY FREESE		20.00	<input type="checkbox"/>
8-2-06	ID# CK#	3707 JAY AVE BRAYTON, IA 50042 LAVONNE SCHROETER		100.00	<input type="checkbox"/>
8-7-06	ID# CK#	1407 MUIBERRY ST ATLANTA, GA 30309 WAYNE SCHULER (9-11-06 ADW)		20.00	<input type="checkbox"/>

SUB-TOTAL \$640.00
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

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

A

(Rev. 07/03)

MONETARY RECEIPTS

CHECK THIS BOX IF AMENDING FORM

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

VOLK FOR SUPERVISOR 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.

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.

CAMPAIGN DISCLOSURE BOARD
OCT 24 2006

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
8-8-06	ID# CK#	1001 MAPLE ST ATLANTIC, IA 50022 J. R. BETZ (220100)		\$ 25.00	<input type="checkbox"/>
8-10-06	ID# CK#	503 E 22ND ST ATLANTIC, IA 50022 DELMAR PATTERSON (500)		100.00	<input type="checkbox"/>
8-7-06	ID# CK#	2102 CHESTNUT ST ATLANTIC, IA 50022 BOB. EINHANS		10.00	<input type="checkbox"/>
8-17-06	ID# CK#	104 E 5TH ST ATLANTIC, IA 50022 RICHARD HOWARD		50.00	<input type="checkbox"/>
8-17-06	ID# CK#	1410 MULBERRY ATLANTIC, IA 50022 ARNOLD LINDEMAN		100.00	<input type="checkbox"/>
8-28-06	ID# CK#	POB 1005 EUDALA, AL 36027 DAVID VOLK	SON	100.00	<input type="checkbox"/>
9-6-06	ID# CK#	513 GRANT AVE HARVEY, MD. 58341 ROBERT VOLK	BROTHER	50.00	<input type="checkbox"/>
9-8-06	ID# CK#	1412 HAZEL ATLANTIC, IA 50022 WARREN HUTCHENSEN		20.00	<input type="checkbox"/>
10-6-06	ID# CK#	1700 BRYN MAWR BLVD ATLANTIC IA 50022 DALE ROURECK		30.00	<input type="checkbox"/>
10-6-06	ID# CK#	1001 MAPLE ST ATLANTIC, IA 50022 J. R. BETZ		53.50	<input type="checkbox"/>
SUB-TOTAL				\$538.50	
TOTAL (if last page of this schedule)				\$	

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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)
VOLK FOR SUPERVISOR

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
<i>10/7/06</i>	ID# CK#	<i>JAMES MAILLARDER</i>		\$ <i>25.00</i>	<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"/>

SUB-TOTAL \$ *25.00*

TOTAL (if last page of this schedule) \$ *120350*

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FOR INSTRUCTIONS, SEE BACK OF 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)
VOLK FOR SUPERVISOR 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
5-26-06	ID# CK# 0119	ATLANTIC NEWS TELEGRAPH 410 WALNUT ST ATLANTIC, IA 50022	POLITICAL AD	\$ 220.80
6-1-06	ID# CK# 0120	ATLANTIC NEWS TELEGRAPH 410 WALNUT ST ATLANTIC, IA 50022	POLITICAL AD	110.40
5-2-06	ID# CK# 0117	ZION 601 WALNUT #1 ATLANTIC, IA 50022	COPIES	25.00
5-9-06	ID# CK# 0118	ZION 601 WALNUT #1 ATLANTIC, IA 50022	COPIES	25.00
5-9-06	ID# CK# -	1ST WHITNEY BANK 223 CHESTNUT ST ATLANTIC, IA 50022	SERVICE CHARGE	.40
6-9-06	ID# CK# 0121	ATLANTIC NEWS TELE. 410 WALNUT ST ATLANTIC, IA 50022	POLITICAL AD	36.80
9-6-06	ID# CK# 0122	601 Walnut #1 ATLANTIC, IA 50022 ZION	COPIES	50.00
10-6-06	ID# CK# 0124	SEARS CREDIT CARD	YARD SIGNS	427.13
SUB-TOTAL				\$ 896.13
TOTAL (if last page of this schedule)				\$ 200

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



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)
VOLK FOR SUPERVISOR 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
10-6-06	ID# CK# 0133	WALNUT ST ATLANTIC IA 50022 R. & R GRAPHICS	CAR SIGNS	\$ 53.50
10-11-06	ID# CK#	1ST WATNEY BANK + TRUST	SERVICE CHG	11
10-19-06	ID# CK# 0125	1404 ROOSEVELT ATLANTIC IA 50022 ARLENE VOLK	CANDY FOR FIREMEN'S PARADE USED 1/2 OF WHAT BOUGHT 25.38 + 2 = 12.69	12.69
	ID# CK#			
SUB-TOTAL				\$ 66.30
TOTAL (if last page of this schedule)				\$ 962.43

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).)