

DISCLOSURE SUMMARY PAGE

**IA ETHICS & CAMPAIGN
DISCLOSURE BOARD**

JAN - 6 2006

FILED

FORM DR-2 (Rev. 01/98)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	<u>91031</u>
Indexed	_____
Audited	_____
Computer	<u>SW</u>

COMMITTEE NAME (Must be same as on Statement of Organization) _____
Cedar County GOP

IMPORTANT: Indicate type of committee you are reporting for:

(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 Slate of Candidates

Gaul R Croch 563-432-6309
SIGNATURE OF TREASURER (or person filing this report) TELEPHONE

Jan 3 2006
DATE SIGNED

Routine Penalties Due For Late Filed Reports Range from \$20 to \$800

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A Jan 1 2005 to Dec 31 2005 REPORT FOR AN/A (1) ELECTION /(2) NON-ELECTION YEAR.
(report date) Indicate one

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.)\$ 445.06

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) 2208.59

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.....\$ 2654.19

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) 935.37

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)\$ 1718.28

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)

Cedar County GOP

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
4-10-15	ID# CK#	Dennis Werk 1895 Wilson Ave Wilton, Ia 52779		\$65.00	<input checked="" type="checkbox"/>
4-10-15	ID# CK#	Valma Huabner P.O. Box 187 Clarence Ia 52216		100.00	<input checked="" type="checkbox"/>
4-10-05	ID# CK#	Sally Miller 563 260 th st West Branch, Ia 52358		75.00	<input checked="" type="checkbox"/>
4-10-05	ID# CK#	Misc. fun & from fundraiser		815.00	<input checked="" type="checkbox"/>
5-2-05	ID# CK#	Paul E. Hauer 1813 Sagy Ridge Road Tipton, Ia 52722		50.00	<input checked="" type="checkbox"/>
6-8-05	ID# CK#	Donation		25.00	<input type="checkbox"/>
6-23-05	ID# CK#	Frederick R Drexler DDS 303 5 th Ave Clarence Ia 52216		200.00	<input type="checkbox"/>
10-4-05	ID# CK#	Jim Hahn 900 West 4 th st. Muscatine Ia 52761		100.00	<input type="checkbox"/>
10-30-05	ID# CK#	Jeff Kaufman 2125 old Muscatine Rd Wilton, Ia 52788		86.60	<input checked="" type="checkbox"/>
10-30-05	ID# CK#	Fredrick Drexler DDS 303 5 th Ave Clarence, Ia 52216		100.00	<input checked="" type="checkbox"/>

SUB-TOTAL

\$ 1616.60

TOTAL (if last page of this schedule)

\$ 2208.59

* 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
<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)
ced County GOP

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<i>10-30-05</i>	ID# CK#	<i>Misc funds from fundraiser</i>		<i>\$ 571.99</i>	<input checked="" type="checkbox"/>
<i>11-18-05</i>	ID# CK#	<i>Donation</i>		<i>20.00</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"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				<i>\$ 591.99</i>	
TOTAL (if last page of this schedule)				<i>\$ 2208.59</i>	

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FOR INSTRUCTIONS, SEE BACK OF FORM

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)
Cedar County GOP

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
4-10	ID# CK# 541	Cove Restaurant Moscow, Ia 52760	Pie, Ice Cream and rental	\$ 257.47
5-7	ID# CK# 542	Valma Huebner 418 9th Ave Clarence, Ia 52216	stamps	46.25
6-8	ID# CK# 543	Cedar County Fair P.O. Box 324 Tipton, Ia 52772	Fair Booth	75.00
8-12	ID# CK# 1001	New Checks transferred account to Bridge Community Bank	Mechanicsville, Ia 52306	15.40
10-30	ID# CK# 1002	Fox Run Golf Club 19 Greenview Lane West Branch, Ia 52788	Food room rent for fundraiser	337.05
10-30	ID# CK# 1003	Jeff Kaufman 2125 Old Muscatine Rd W. Hon Ia 52788	To pay for add placed in Advocate News Box 40 Wilton, Ia 52728	32.00
10-30	ID# CK# 1004	Conservative Publishing P.O. Box 271 Tipton Ia 52772	Ad for fundraiser	156.60
12-26	ID# CK# 1005	Valma Huebner 498 9th Ave Clarence Ia 52216	stamps	15.60
SUB-TOTAL				\$
TOTAL (if last page of this schedule)				\$ 935.37

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).)

