Delaware

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Reset Form

FORM DR-2 (Rev. 07/2004)	DISCLOSURE REPORT

For Office Use Only

Comm. # _____

Logged In _____

Scanned _____

Computer _____

Audited _____

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

Citizens for an Informed Vote

IMPORTANT: Indicate by # type of committee you are reporting for: [ ]
(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) _____

JAN 17 2006 PM 1:14:06

Late reports are subject to possible civil and criminal penalties.

Debbie Strauser

SIGNATURE OF PERSON FILING REPORT **TELEPHONE** **DATE SIGNED**

I AM FILING A Jan. 19, 2006 (report date) REPORT FOR **(1) ELECTION /(2)NON-ELECTION** YEAR 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 _____

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. (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.) $ 1357.80

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) 55.00

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 $ 1412.80

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) 446.42

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) $ 966.38

UNPAID BILLS (From Schedule D - Attach Schedule D) $ 0

IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) $ 0

OUTSTANDING LOANS (From Schedule F - Attach Schedule F) $ 0

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

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)*
Citizens for an Informed Vote

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
8/10	ID# CK#	no name		$20.00	☐
8/22	ID# CK#	Jim Miller		25	☐
8/22	ID# CK#	Ray Rierieto		10.00	☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐
			SUB-TOTAL	$ 55.00	
			TOTAL ***(if last page of this schedule)***	$ 55.00	

* 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 _____ of _____
(for Schedule A)

Citizens for an Informed Vote

Expenditures

JAN 17 2006

CK#	date		
1007	8/8	Delaware Co. Courthouse (printed mailing lables)	30.00
1008	8/8	Walmart (envelopes)	27.38
1009	8/9	Post Office (stamps)	218.30
1010	8/10	Secretary of State (voter reg. list)	5.76
1011		voided check	
1012	9/21	Sue Behrns (monthly web site fee paid by credit card)	19.99
1013	10/13	Sue Behrns (monthly web site fee paid by credit card)	19.99
1014		voided check	
1015		Sue Behrns (domaine name renewal 5 yrs paid by credit card)	125.00
			446.42

Did not have a Schedule-B