

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. 12 th , Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-3701	

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

Citizens to Renew PPEL

IMPORTANT: Indicate by # type of committee you are reporting for: 11

(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) _____

IA ETHICS & CAMPAIGN DISCLOSURE BOARD
SEP - 7 2006
UPS - NEXT DAY AIR

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.

Douglas Horstmann 563-589-2104 09-07-06
 SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A 09-07-06 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 09-12-06
 County & Local Committees, enter County in which Election is held Dubuque

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.)\$ 0

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)..... 4,190.00

Schedule F: Loans Received total (Attach Schedule F)..... 0

Schedule H: Total Sales of Campaign Property (Attach Schedule H) 0

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL\$ 4,190.00

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)..... 0

Schedule F: Loan Repayments total (Attach Schedule F)..... 0

CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3).....\$ 4,190.00

**UNPAID BILLS (From Schedule D - Attach Schedule D)\$ 1,500.00

**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)\$ NA

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

For Instructions, See Back of Form

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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)
Citizens to Renew PPEL

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
6-9-06	ID# CK#	Barton, Tom 13673 Barrington Ct. Dubuque, IA 52003		\$ 100.00	<input type="checkbox"/>
6-9-06	ID# CK#	Bauerly, Donna 305 River Ridge Dubuque, IA 52003		200.00	<input type="checkbox"/>
6-9-06	ID# CK#	Bradley, Nancy 2380 Clarke Crest Dr. Dubuque, IA 52001		50.00	<input type="checkbox"/>
6-9-06	ID# CK#	Burgart, John 565 Woodland Ridge Dubuque, IA 52003		150.00	<input type="checkbox"/>
6-9-06	ID# CK#	Burke, Bob 2162 St. John Dr. Dubuque, IA 52002		100.00	<input type="checkbox"/>
6-9-06	ID# CK#	Dwaney, Lynne 1050 Malrose Ter Dubuque, IA 52001		100.00	<input type="checkbox"/>
6-9-06	ID# CK#	Hall, Kris 11500 Amy Drive Dubuque, IA 52003		100.00	<input type="checkbox"/>
6-9-06	ID# CK#	Hansen, Roy 3079 Oak View Ct. Dubuque, IA 52001		40.00	<input type="checkbox"/>
6-9-06	ID# CK#	Holm, Ronald 2432 Wheatland Dr. Dubuque, IA 52002		100.00	<input type="checkbox"/>
6-9-06	ID# CK#	Horstman, Shirley 17009 W. Sandridge Ct. East Dubuque, IL 61025		20.00	<input type="checkbox"/>
SUB-TOTAL				\$ 960.00	
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.

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6-9-06	ID# CK#	Horstmann, Doug 2418 Beacon Hill Drive Dubuque, IA 52001		\$ 100.00	<input type="checkbox"/>
6-9-06	ID# CK#	Johnson, Julie 1782 Dover Ct. Dubuque, IA 52003		100.00	<input type="checkbox"/>
6-9-06	ID# CK#	Kellner, Kevin 9237 Bellevue Heights Dubuque, IA 52003		100.00	<input type="checkbox"/>
6-9-06	ID# CK#	Kelly, Vicki 9978 Laudewille Rd Dubuque, IA 52003		100.00	<input type="checkbox"/>
6-9-06	ID# CK#	Lagen, Joan 3548 Lunar Dr. Dubuque, IA 52003		25.00	<input type="checkbox"/>
6-9-06	ID# CK#	Lowen, Donna 1088 Melrose Terr Dubuque, IA 52001		25.00	<input type="checkbox"/>
6-9-06	ID# CK#	Lucken, Joann 17991 Boy Scout Rd. Durango, IA 52039		100.00	<input type="checkbox"/>
6-9-06	ID# CK#	Meehan, Susan 2485 Samantha Dr. Dubuque, IA 52002		50.00	<input type="checkbox"/>
6-9-06	ID# CK#	Mitchell, Brenda 10584 Cardinal Dr. Peosta, IA 52068		50.00	<input type="checkbox"/>
6-9-06	ID# CK#	Patton, David 2336 Graham Cr. Dubuque, IA 52002		100.00	<input type="checkbox"/>
SUB-TOTAL				\$ 750.00	
TOTAL (if last page of this schedule)				\$	

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6-9-06	ID# CK#	Puls, Steve 2055 Avalon Rd. Dubuque, IA 52001		\$ 40.00	<input type="checkbox"/>
6-9-06	ID# CK#	Shaw, Donna 2210 Evergreen Dr. Dubuque, IA 52001		25.00	<input type="checkbox"/>
6-9-06	ID# CK#	White, Bob 10629 Waters Forest Dr. Dubuque, IA 52003		40.00	<input type="checkbox"/>
6-14-06	ID# CK#	Lambert, Patrice 108 Garfield St NW Cascade, IA 52033		50.00	<input type="checkbox"/>
6-14-06	ID# CK#	Muir, Diane 995 Wood St. Dubuque, IA 52001		50.00	<input type="checkbox"/>
6-14-06	ID# CK#	Lansing, Suzanne 3761 Hillcrest Rd. Dubuque, IA 52002		50.00	<input type="checkbox"/>
6-14-06	ID# CK#	Straka Johnson Architects 10502 St. Joseph Dr. Dubuque, IA 52003		1,000.00	<input type="checkbox"/>
6-22-06	ID# CK#	Jean McDonald Burgmeier 3120 Eagle Point Dr. Dubuque, IA 52001		100.00	<input type="checkbox"/>
6-22-06	ID# CK#	Mary Jo Weitz 3075 Kaufmann Ave. Dubuque, IA 52001		50.00	<input type="checkbox"/>
6-22-06	ID# CK#	Brett Buse 1350 Oak Ct. Dubuque, IA 52003		25.00	<input type="checkbox"/>
SUB-TOTAL				\$ 1,430.00	
TOTAL (if last page of this schedule)				\$	

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7-26-06	ID# CK#	<i>Durrant 700 Locust St STE 942 Dubuque, IA 52001</i>		\$ <i>1,000.00</i>	<input type="checkbox"/>
8-9-06	ID# CK#	<i>Adam Mennig 3130 Ideal Ln. Dubuque, IA 52001</i>		<i>50.00</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"/>

SUB-TOTAL
\$ *1,050.00*
TOTAL (if last page of this schedule)
\$ *4,190.00*

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