

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Reset Form

COMMITTEE NAME (Must be same as on Statement of Organization)  
 MIKE LEHMAN FOR SUPERVISOR

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: Mike E. Lehman Political Party (if applicable): Democrat  
 Office Sought: County Supervisor District (if Senate or House):

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

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

File with:  
 Iowa Ethics and Campaign  
 Disclosure Board  
 510 E. 12<sup>th</sup> 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.

Frederick A. Scheiber SIGNATURE OF PERSON FILING REPORT  
319 3374057 TELEPHONE  
5-18-06 DATE SIGNED

I AM FILING A May 14, 2006 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.  
 (report date) 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  
06/06/06  
 County & Local Committees, enter County in which Election is held  
Johnson

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.)	\$	0.00
<b>ADD TOTAL MONEY TAKEN IN THIS PERIOD</b>		
Schedule A: Cash Contributions total (Attach Schedule A) (**also see in-kind below)		3,554.99
Schedule F: Loans Received total (Attach Schedule F)		0.00
Schedule H: Total Sales of Campaign Property (Attach Schedule H)		0.00
<u>(Schedule H applies to Candidates' Committees Only)</u>		
<b>SUB-TOTAL</b>	\$	3,554.99
<b>SUBTRACT TOTAL MONEY SPENT THIS PERIOD</b>		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		186.95
Schedule F: Loan Repayments total (Attach Schedule F)		0.00
CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3)	\$	3,368.04
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	1,216.46
**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 <input checked="" type="checkbox"/> NO
<b>CANDIDATE COMMITTEES ONLY:</b>		
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$	
<b>STATE COMMITTEES:</b> Submit a reconciled campaign account bank statement in January of each year.		

For Instructions, See Back of Form

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SCHEDULE <b>A</b> (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)**

MIKE LEHMAN 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
05/09/06	ID# CK#	Mr. & Mrs Wayne Baltner 359 Lexington Ave. Iowa City, Ia 52246		\$30.00	<input type="checkbox"/>
05/08/06	ID# CK#	Robert Barker 437 Butternut Lane Iowa City, Ia 52246		100.00	<input type="checkbox"/>
05/06/06	ID# CK#	Bob & Judy Boyd 1850 Country Club Dr. Coralville, Ia 52241		50.00	<input type="checkbox"/>
05/06/06	ID# CK#	Kitty & Joe Buckwalter 2252 Cae Dr. Iowa City, Ia 52246		50.00	<input type="checkbox"/>
05/05/06	ID# CK#	Bill & Linda Bywater 621 S. Summit St. Iowa City, Ia 52240		100.00	<input type="checkbox"/>
05/08/06	ID# CK#	Leah Cohen 1638 Teg Dr. Iowa City, Ia 52246		100.00	<input type="checkbox"/>
05/09/06	ID# CK#	John & Allie Dane 4082 Dane Road Iowa City, Ia 52240		50.00	<input type="checkbox"/>
05/06/06	ID# CK#	Greg Downes 3501 Osage S.W. Iowa City, Ia 52240		50.00	<input type="checkbox"/>
05/12/06	ID# CK#	Dan & JoAnne Downes 3936 Eagle Ave. SW Oxford, Ia 52322		50.00	<input type="checkbox"/>
05/09/06	ID# CK#	Michael & Carla Durkee 3586 Forest Gate Dr Iowa City, Ia 52240		100.00	<input type="checkbox"/>
SUB-TOTAL				\$ 680.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

\* 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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**CONTRIBUTIONS -- MONEY TAKEN IN**  
(Including candidate's personal funds)

**COMMITTEE NAME (Must be same as on Statement of Organization)**  
MIKE LEHMAN FOR SUPERVISOR

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05/10/06	ID# CK#	Wayne Frantz 1153 Hampton Ct. Iowa City, Ia 52240		\$50.00	<input type="checkbox"/>
05/06/06	ID# CK#	Beth & Bill Erkonen 1881 Brown Deer Rd. Coralville, Ia 52241		100.00	<input type="checkbox"/>
05/04/06	ID# CK#	Charles & Connie Funk 4779 Dryden Ct. Iowa City, Ia 52245		100.00	<input type="checkbox"/>
05/04/06	ID# CK#	Marty & Mary Gaffey 5240 Fairview Cementary Rd. Iowa City, Ia 52240		75.00	<input type="checkbox"/>
05/05/06	ID# CK#	Mike & Julie Gatens 2045 Dubuque Rd. Iowa City, Ia 52240		100.00	<input type="checkbox"/>
05/06/06	ID# CK#	Tim & Deb Lehman 2715 Canterbury Ct. Iowa City, Ia 52245	Brother/Sister-in	100.00	<input type="checkbox"/>
05/08/06	ID# CK#	Carroll & Bev Lust 4051 Stewart Rd. N.E. Iowa City, Ia 52240		100.00	<input type="checkbox"/>
05/10/06	ID# CK#	John & Linda McDonald 23 Rita Lyn Ct. Iowa City, Ia 52245		50.00	<input type="checkbox"/>
05/06/06	ID# CK#	Dick Meade 370 E Penn St. North Liberty, Ia.		50.00	<input type="checkbox"/>
05/06/06	ID# CK#	Armond & Polly Pagliai 2883 Wapsi Ave. N.E. Iowa City, Ia 52240		50.00	<input type="checkbox"/>

SUB-TOTAL  
\$ 775.00  
TOTAL (if last page of this schedule)  
\$

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<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
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**CONTRIBUTIONS -- MONEY TAKEN IN**  
(Including candidate's personal funds)

**COMMITTEE NAME (Must be same as on Statement of Organization)**  
MIKE LEHMAN FOR SUPERVISOR

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05/04/06	ID# CK#	David Parsons 1035 7th Ave. Iowa City, Ia 52241		\$100.00	<input type="checkbox"/>
05/08/06	ID# CK#	Kathryn Rarick 2897 240th St. N.W. North Liberty, Iowa 52317		100.00	<input type="checkbox"/>
05/06/06	ID# CK#	Dell & Mary Richards 1250 Melrose Ave. Iowa City, Ia 52240		50.00	<input type="checkbox"/>
05/06/06	ID# CK#	Tom & Tim Riley 2529 Galway Ct. Iowa City, Ia 52240	Brother-in-law	200.00	<input type="checkbox"/>
05/05/06	ID# CK#	Earl & Diane Riley 2161 Terra Lane Coralville, Ia 52241	Father in Law	200.00	<input type="checkbox"/>
05/10/06	ID# CK#	Terry Riley 940 Central Rd. Suite 107 Steamboat Springs, Co 80487	Brother-in-law	200.00	<input type="checkbox"/>
05/06/06	ID# CK#	John & Marilyn Rogers 744 Spencer Drive Iowa City, Ia 52246		50.00	<input type="checkbox"/>
05/13/06	ID# CK#	Isabelle Smith 2208 Rochester Ave. Iowa City, Ia 52240		50.00	<input type="checkbox"/>
05/04/06	ID# CK#	Bill & Pat Sueppel 1408 Bristol Dr. Iowa City, Ia 52245		50.00	<input type="checkbox"/>
05/06/06	ID# CK#	Don Gringer 2536 Hwy 1 S.W. Iowa City, Ia 52240		100.00	<input type="checkbox"/>
SUB-TOTAL				\$ 1,100.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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**CONTRIBUTIONS – MONEY TAKEN IN**  
 (including candidate's personal funds)

**COMMITTEE NAME (Must be same as on Statement of Organization)**  
 MIKE LEHMAN FOR SUPERVISOR

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05/11/06	ID# CK#	Tom & Anita Wall 5324 Morse Rd. NE Iowa City, Ia 52240		\$75.00	<input type="checkbox"/>
05/12/06	ID# CK#	Mike Wombacher 904 Fairway Lane Iowa City, Ia 52240		100.00	<input type="checkbox"/>
05/06/06	ID# CK#	Don Yeager 4935 420th St S.E. Iowa City, Ia 52240		100.00	<input type="checkbox"/>
05/01/06	ID# CK#	Payt McGillin 2863 Coral Court Coralville, Ia 52241		150.00	<input type="checkbox"/>
	ID# CK#	Unitemized Contributions		574.99	<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 \$ 999.99

**TOTAL (if last page of this schedule)** \$ 3,554.99

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**EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT**

SCHEDULE <b>B</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)

MIKE LEHMAN FOR SUPERVISOR

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
04/25/06	ID# CK#	US Bank 127 West Main Street West Branch, Iowa 52358	Checks	\$ 16.95
05/01/06	ID# CK#	Knights of Columbus 4776 American Legion Rd Iowa City, Ia 52240	Rental for fund raiser	150.00
05/03/06	ID# CK#	Staples Offic Supply 911 Hwy 1 West Iowa City, Ia 52246	Endorsement stamp	20.00
	ID# CK#			
SUB-TOTAL				\$ 186.95
<b>TOTAL (If last page of this schedule)</b>				<b>\$ 186.95</b>

**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).)

