

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)

Koehler for County Treasurer 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 Mary J Koehler Political Party (if applicable) Democrat

Office Sought Lee County Treasurer District (if Senate or House) _____

MAY 22 2006 P.M. 5-18-06

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.

Mary Koehler 319-463-7177 5-16-06
SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A May 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
June 6, 2006

County & Local Committees, enter County in which Election is held
Lee

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>Ø</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below).....	<u>1807⁰⁰</u>
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	\$ _____
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below).....	<u>631.10</u>
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).....	\$ <u>1,175.90</u>

**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) \$ _____

CONSULTANT BREAKDOWN (Schedule G Attached?) _____ YES _____ NO

CANDIDATE COMMITTEES ONLY:
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) \$ _____

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)
Koehler for County Treasurer 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.

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
02/01/06	ID# CK#	Kerry Klepfer 29 Greenbrier Ct, Keokuk IA 52632		\$ 100 ⁰⁰	<input type="checkbox"/>
02/01/06	ID# CK#	Birdwell H Sutlive 211 Morgan St Keokuk IA 52632		100 ⁰⁰	<input type="checkbox"/>
04/14/06	ID# CK#	Veronica Kearns 3385 Middle Rd Keokuk IA 52632		100 ⁰⁰	<input type="checkbox"/>
04/15/06	ID# CK#	Joan Merschman 3255 N US 19 Perry FL 32347	Sister in Law	50 ⁰⁰	<input type="checkbox"/>
04/18/06	ID# CK#	Gary / Jeanne Welsh 304 Cedar St Montrose IA 52639		50 ⁰⁰	<input type="checkbox"/>
04/22/06	ID# CK#	John Swan 3295 Middle Rd Keokuk IA 52632		50 ⁰⁰	<input type="checkbox"/>
04/22/06	ID# CK#	James Hoffman 3550 270th Ave Keokuk IA 52632		150 ⁰⁰	<input type="checkbox"/>
05/02/06	ID# CK#	Ann Menke 406 Ave E West Point IA 52656		50 ⁰⁰	<input type="checkbox"/>
05/02/06	ID# CK#	Kate Menke 95 8th St West Point IA 52656		50 ⁰⁰	<input type="checkbox"/>
05/03/06	ID# CK#	Albert Smith 817 Roost Keokuk IA 52632		50 ⁰⁰	<input type="checkbox"/>
SUB-TOTAL				\$ 750 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

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COMMITTEE NAME (Must be same as on Statement of Organization)
Koehler for County Treasurer Committee

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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
05/03/06	ID# CK#	Ed Johnstone II 1329 Grand Ave Keokuk IA 52632	100⁰⁰	\$ 100 ⁰⁰	<input type="checkbox"/>
4/30/06	ID# CK#	James Wray 3316 Timberline Drive Keokuk IA 52632	100⁰⁰	100 ⁰⁰	<input type="checkbox"/>
4/30/06	ID# CK#	Tom Cale 7 Harmony Ct Ft Madison IA 52627	50⁰⁰	50 ⁰⁰	<input type="checkbox"/>
4/30/06	ID# CK#	David Hunold 2493 340 th St Keokuk IA 52632	50⁰⁰	50 ⁰⁰	<input type="checkbox"/>
5/04/06	ID# CK#	Carol Beelman 206 Elm St Montrose IA 52639	50⁰⁰	50 ⁰⁰	<input type="checkbox"/>
5/04/06	ID# CK#	Carl McMurray 2705 Crest Ct Keokuk IA 52632	50⁰⁰	50 ⁰⁰	<input type="checkbox"/>
5/04/06	ID# CK#	Dennis Burke 3022 Koehler Ln Montrose IA 52639	50⁰⁰	50 ⁰⁰	<input type="checkbox"/>
4/30/06	ID# CK#			302 ⁰⁰	<input checked="" type="checkbox"/>
	ID# CK#	unitemized contributions		305 ⁰⁰	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 1057 ⁰⁰	
TOTAL (if last page of this schedule)				\$ 1807 ⁰⁰	

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FOR INSTRUCTIONS, SEE BACK OF FORM

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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)
Koehler for County Treasurer 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
3/20/06	ID# CK# 1001	Postmaster Keokuk IA 52632	Postage for mailing flyers for campaign	\$ 39 ⁰⁰
3/21/06	ID# CK# 1002	Central Printing 3028 S 7th St Keokuk IA 52632	Printing Campaign flyers	37.75
4/17/06	ID# CK# 1003	Postmaster Keokuk IA 52632	Postage for mailing flyers and postcards for fundraiser	63 ⁰⁰
4/19/06	ID# CK# 1004	Central Printing 3028 S 7th St Keokuk IA 52632	Printing of Postcards for fund raiser	51 ⁰⁰
4/24/06	ID# CK# 1005	Pepsi-Memphis Bottling Co. 4042 Main St Keokuk IA 52632	Soda drinks for fundraiser	90 ⁰⁰
4/26/06	ID# CK# 1006	McFarland Supply 225 So 5th St Keokuk IA 52632	Paper supplies for campaign and fundraiser	38 ⁶⁸
4/26/06	ID# CK# 1007	Party Supply Inc 300 main St Keokuk IA 52632	Party supplies for campaign and fundraiser	42 ⁷¹
5/10/06	ID# CK# 1008	Central Printing 3028 S 7th St Keokuk IA 52632	Printing of Postcards for Absentee Voters	214 ⁹⁶
SUB-TOTAL				\$ 577 ¹⁰
TOTAL (if last page of this schedule)				\$

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).)

