

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

IA ETHICS & CAMPAIGN DISCLOSURE BOARD
FILED
JUL 1 3 2006

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

Committee to Elect Janet Strunk County Treasurer

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: Janet Strunk
Political Party (if applicable): Democrat

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

FORM DR-2 DISCLOSURE REPORT
For Office Use Only
Comm #
Logged In
Scanned
Computer
Audited
File with: Iowa Ethics and Campaign Disclosure Board
510 E. 12th, 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.

Sandra J. Greenwald
SIGNATURE OF PERSON FILING REPORT

(319) 463-7204
TELEPHONE

7-13-06
DATE SIGNED

I AM FILING A 7/19/06 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
County & Local Committees, enter County in which Election is held
Lee

STATEMENT OF CASH ON HAND

Table with 2 columns: Description and Amount. Rows include: CASH ON HAND at the beginning of the reporting period (\$ 2,849.93), ADD TOTAL MONEY TAKEN IN THIS PERIOD (Schedule A: 75.00, Schedule F: Loans Received total, Schedule H: Total Sales of Campaign Property), SUB-TOTAL (\$ 2,924.93), SUBTRACT TOTAL MONEY SPENT THIS PERIOD (Schedule B: Expenditures total, Schedule F: Loan Repayments total), CASH ON HAND at the end of this reporting period (\$ 228.16), **UNPAID BILLS (\$), **IN KIND CONTRIBUTIONS (\$ 75.80), **OUTSTANDING LOANS (\$ 100.00), CONSULTANT BREAKDOWN (YES/NO), CANDIDATE COMMITTEES ONLY: VALUE OF CAMPAIGN PROPERTY (\$ 0.00), STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

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)
Committee to Elect Janet Strunk County Treasurer

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
5/24/06	ID# CK#	Carol Fullenkamp West Point, IA 52656		\$25.00	<input type="checkbox"/>
6/4/06	ID# CK#	Bill Linnenbrink 2869 Chalk Ridge Road, Fort Madison, IA 52627		\$50.00	<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
\$
TOTAL (if last page of this schedule)
\$ 75.00

* 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.

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)
Committee to Elect Janet Strunk County Treasurer

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
5/17/06	ID# CK# 1132	United States Post Office 1019 Avenue H Fort Madison, IA 52627	Stamps for mailings	\$ 24.00
5/24/06	ID# CK# 1007	Craftsman Press 203 N 3rd Street Burlington, IA 52601	Yard signs	\$321.00
5/23/06	ID# CK# 1133	United States Post Office 1019 Avenue H Fort Madison, IA 52627	Stamps for mailings	\$24.00
5/31/06	ID# CK# 1135	United States Post Office 1019 Avenue H Fort Madison, IA 52627	Stamps for mailings	\$24.00
5/31/06	ID# CK# 1134	Daily Democrat 1226 Avenue H Fort Madison, IA 52627	Newspaper Advertising	\$951.90
6/2/06	ID# CK# 1138	Withers Broadcasting PO Box 427 Keokuk, IA 52632	Radio Advertising	\$400.00
6/2/06	ID# CK# 1137	United States Post Office 1019 Avenue H Fort Madison, IA 52627	Stamps for mailings	\$7.20
6/5/06	ID# CK# 1139	United States Post Office 1019 Avenue H Fort Madison, IA 52627	Stamps for mailings	\$399.36
SUB-TOTAL				\$ 2,151.46
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).)

FOR INSTRUCTIONS, SEE BACK OF FORM



SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

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)
Committee to Elect Janet Strunk County Treasurer

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
6/1/06	ID# CK# 1136	United States Post Office 1019 Avenue H Fort Madison, IA 52627	Postage for mailing	\$ 390.00
6/6/06	ID# CK# 1140	Craftsman Press 203 N 3rd Street Burlington, IA 52601	Campaign cards	\$126.26
6/23/06	ID# CK# 1008	Dodd Printing 621 Avenue G Fort Madison, IA 52627	Office supplies	\$29.05
	ID# CK#			
SUB-TOTAL				\$ 545.31
TOTAL (if last page of this schedule)				\$ 2,696.77

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).)

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Reset Form

SCHEDULE F (Rev. 07/03)	LOANS RECEIVED & REPAID
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
Committee to Elect Janet Strunk County Treasurer

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 0

PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD
(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN
1/9/06	Janet Strunk 2890 County Road 103 Fort Madison, IA 52627	Candidate	\$ 100.00

TOTAL (PART I) \$ 100.00

PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD
(Loans forgiven must be reported on Schedule E -- In-kind Contributions.)

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAID
			\$

TOTAL CASH REPAYMENTS (PART II) \$ _____

From Schedule E -- TOTAL LOANS FORGIVEN \$ _____

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 100.00

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