

FOR INSTRUCTIONS, SEE BACK OF FORM

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)

Committee to Elect Janet Strunk County Treasurer

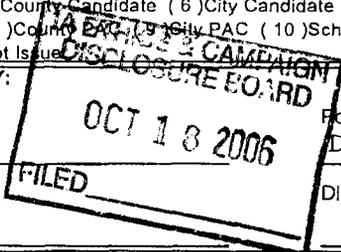
IMPORTANT: Indicate by # type of committee you are reporting for: 5

(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 Party (9)City PAC (10)School Board or Other Political Subdivision PAC (11)Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name: Janet Strunk
Office Sought: Lee County Treasurer

Political Party (if applicable): Democrat
District (if Senate or House):



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 Greenwald (319) 463-7204 10-18-06
SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A 10/19/06 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

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.)	\$ 228.16
ADD TOTAL MONEY TAKEN IN THIS PERIOD	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below).....	2,245.00
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	\$ 2,473.16
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below).....	1,053.32
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).....	\$ 1,419.84

**UNPAID BILLS (From Schedule D - Attach Schedule D) \$ _____

*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) \$ 157.03

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F) \$ 100.00

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

Reset 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
	ID# CK#	See attached pages		\$	<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"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$
\$ 2,245.00

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.

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
8/16/06		Anne Pedersen 506 33 rd Street Fort Madison, IA 52627		\$25.00	
8/28/06		Sara Jan Garza 2023 Avenue H Fort Madison, IA 52627		\$25.00	
8/28/06		Unitemized Contribution		\$20.00	
8/24/06		Kenneth Gardner 4700 West Street Sioux City, IA 51108		\$150.00	
8/28/06		Kathleen McKillip 2657 Clearview Heights Road Fort Madison, IA 52627		\$25.00	
8/30/06		John Schier 1502 Avenue C Fort Madison, IA 52627		\$25.00	
8/31/06		Diane Rempé 2100 West Point Road West Point, IA 52656		\$75.00	
9/2/06		Jean Humphrey 10 Black Hawk Heights Fort Madison, IA 52627		\$35.00	
9/2/06		Linda Hoernig 1907 Avenue J Fort Madison, IA 52627		\$50.00	
9/5/06		Jeanette Brasfield 435 33 rd Street Fort Madison, IA 52627		\$20.00	
9/7/06		Christine Panther 431 33 rd Street Fort Madison, IA 52627		\$25.00	
9/10/06		Joyce Kruse PO Box 97 Houghton, IA 52631		\$100.00	
			Subtotal	\$575.00	

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
9/10/06		Reva Miller 1024 Orleans Avenue Keokuk, IA 52632		\$25.00	
9/11/06		Patricia Tebbs 3337 Country Club Lane Fort Madison, IA 52627		\$50.00	
9/11/06		Lois Eichacker 2330 Harper Lane Fort Madison, IA 52627		\$100.00	
9/11/06		Marilyn Leveling 22 Richards Drive Fort Madison, IA 52627		\$25.00	
9/11/06		Carol Chadwick 2741 255 th Avenue Montrose, IA 52639		\$20.00	
9/13/06		Betty Walker 2544 274 th Street Montrose, IA 52639		\$50.00	
9/13/06		Rita Beach 2894 180 th Street Fort Madison, IA 52627		\$25.00	
9/14/06		Virginia Chestnut 3571 Hwy 16 Wever, IA 52658		\$25.00	
9/15/06		Janet Fife-LaFrenz 1122 Grand Avenue Keokuk, IA 52632		\$50.00	
9/20/06		Eulas Baney 4419 Avenue L Fort Madison, IA 52627		\$20.00	
9/21/06		Betty Posz 919 Old Denmark Hill Fort Madison, IA 52627		\$35.00	
			Subtotal	\$425.00	

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
9/24/06		Eugene Fraise 1699 280 th Avenue Fort Madison, IA 52627		\$100.00	
9/24/06		Mac Law 25 Melody Court Keokuk, IA 52632		\$50.00	
9/24/06		Judy Young 1833 210 th Street Donnellson, IA 52625		\$20.00	
9/26/06		L. H. Eichacker 2330 Harper Lane Fort Madison, IA 52627		\$100.00	
10/2/06		Bill Dahms 33 West Wood Court Donnellson, IA 52625		\$100.00	
10/5/06		Dallas Harness 1228 Avenue B Fort Madison, IA 52627	Uncle by marriage	\$100.00	
10/10/06		Connie Fahey 1312 Avenue B Fort Madison, IA 52627		\$25.00	X
10/10/06		Diana Kearns 402 Hickory Terrace Keokuk, IA 52632		\$100.00	X
10/10/06		Karen Bryant 328 Chester Street Keokuk, IA 52632		\$50.00	X
10/10/06		Steve Ireland 1904 Avenue D Fort Madison, IA 52627		\$25.00	X
10/10/06		Rick Larkin 1304 Avenue B Fort Madison, IA 52627		\$100.00	X
			Subtotal	\$770.00	

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
10/10/06		William Hoskins 819 Avenue D Fort Madison, IA 52627		\$25.00	X
10/10/06		Betty Walker 2544 274 th Street Montrose, IA 52639		\$25.00	X
10/10/06		Jim Bethurem 1964 West Point Road West Point, IA 52656		\$50.00	X
10/10/06		Mike Sanders 1672 Franklin Road West Point, IA 52656		\$100.00	X
10/10/06		Unitemized Contributions		\$80.00	X
10/10/06		Karen Jones 2312 Avenue E Fort Madison, IA 52627		\$20.00	X
10/10/06		Raymond Krogmeier 51 5 th Street West Point, IA 52656		\$25.00	X
10/10/06		Wm Olmsted 628 Franklin Keokuk, IA 52632		\$50.00	X
10/12/06		Bill Linnenbrink 2869 Chalk Ridge Road Fort Madison, IA 52627	Brother-in-law by marriage	\$100.00	
			Subtotal	\$475.00	
			TOTAL	\$2,245.00	

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
8/11/06	ID# CK# 1141	Dodd Printing 621 Avenue G Fort Madison, IA 52627	Decorations for parades	\$ 31.27
8/12/06	ID# CK# 1142	Faeth's Cigar Store 832 Avenue G Fort Madison, IA 52627	Candy for parades	10.08
8/16/06	ID# CK# 1143	Dodd Printing 621 Avenue G Fort Madison, IA 52627	Paper for fundraiser letters	12.94
8/25/06	ID# CK# 1144	County Market 18th & Avenue H Fort Madison, IA 52627	Stamps for seed money contributions	15.60
8/26/06	ID# CK# 1145	Faeth's Cigar Store 832 Avenue G Fort Madison, IA 52627	Candy for parades	13.58
8/30/06	ID# CK# 1146	County Market 18th & Avenue H Fort Madison, IA 52627	Candy for parades	39.00
8/30/06	ID# CK# 1147	Dodd Printing 621 Avenue G Fort Madison, IA 52627	Tape for parades	6.78
8/30/06	ID# CK# 1148	Faeth's Cigar Store 832 Avenue G Fort Madison, IA 52627	Candy for parades	40.74
SUB-TOTAL				\$ 169.99
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

Reset 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.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<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

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
9/1/06	ID# CK# 1149	Craftsman Press 203 N 3rd Street Burlington, IA 52601	Business Cards	\$ 40.66
9/8/06	ID# CK# 1150	Faeth's Cigar Store 832 Avenue G Fort Madison, IA 52627	Candy for parades	20.37
9/13/06	ID# CK# 1031	MVSP 606 Avenue G Fort Madison, IA 526276	Parade T-shirt	13.43
9/13/06	ID# CK# 1032	Craftsman Press 203 N 3rd Street Burlington, IA 52601	Cowboy cards	262.15
9/22/06	ID# CK# 1033	United States Post Office 1019 Avenue H Fort Madison, IA 52627	Postage for mailings	9.60
10/4/06	ID# CK# 1034	Labor Day Fund 301 Blondeau Keokuk, IA 52632	Advertising	75.00
10/6/06	ID# CK# 1009	Craftsman Press 203 N 3rd Street Burlington, IA 52601	Yard signs	283.55
10/6/06	ID# CK# 1010	ICS 7200 S Alton Way B-260 Centennial, CO 80112	Automated telephone calls	54.73
SUB-TOTAL				\$ 759.49
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

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
10/10/06	ID# CK#1011	HyVee 2606 Avenue L Fort Madison, IA 52627	Fundraiser Food	\$ 37.99
10/7/06	ID# CK#1035	Dollar General 4809 Avenue O Fort Madison, IA 52627	Fundraiser Supplies	13.13
10/7/06	ID# CK# 1036	Dave's Old Fashion Meats 111 N 1st Street Montrose, IA 52639	Fundraiser Meat	41.37
10/14/06	ID# CK#1037	Dodd Printing 621 Avenue G Fort Madison, IA 52627	Printer & parade supplies	29.02
10/16/06	ID# CK#1012	Dodd Printing 621 Avenue G Fort Madison, IA 52627	Rubber bands	2.33
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 123.84
TOTAL (if last page of this schedule)				\$ 1,053.32

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

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



SCHEDULE E (Rev. 06/97)	IN-KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
8/6/06	Sandy Greenwald 2734 255th Avenue Montrose, IA 52639		T-shirt for parades	\$ 15.03	<input type="checkbox"/>
9/1/06	Joan Sheppard 2647 240th Street Fort Madison, IA 52627		T-shirt for parades	20.00	<input type="checkbox"/>
9/4/06	Bill Sheppard 2647 240th Street Fort Madison, IA 52627		Sign parts, paint, straw, flags, gas for narades	35.00	<input type="checkbox"/>
10/10/06	Sandy Greenwald 2734 255th Avenue Montrose, IA 52639		Wine, beer, pop for fundraiser	40.00	<input checked="" type="checkbox"/>
10/10/06	Joan Sheppard 2647 240th Street Fort Madison, IA 52627		Desserts for fundraiser	22.00	<input checked="" type="checkbox"/>
10/10/06	Linda Pollmeier 2735 Avenue A Fort Madison, IA 52627		Salads for fundraiser	25.00	<input checked="" type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL	\$ 157.03
TOTAL (if last page of this schedule)	\$ 157.03

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.



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 \$ 100.00

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
			\$

TOTAL (PART I) \$ _____

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

*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 when it applies.